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External Interface Specification for X12 Overview and Interface Design

Volume 2 Eligibility Inquiry and Response (FINAL Draft)

Prepared for
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Personnel and Readiness
And
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External Interface System version xx.x updates as of July 10, 2002.

997 -Functional Acknowledgement

- Revised format to match other transaction sets.
- Added code values and fixed typographical errors per TRICARE Management Activity Health Insurance Portability and Accountability Act (HIPAA) of 1996 HIPAA Review.

Extenal Interface System version 13.1 updates as of November 15, 2001

270 Health Care Coverage for MTF Inquiry:

- Added the Sponsor Inquiry using the Patient Identification Diagram.
- Added the Dependent Inquiry using the Social Security number (SSN), Name, and Date of Birth Diagram.
- Changed NM109 of the Receiver Hierarchical Level (HL) from the electronic data interchange (EDI) System Identifier (ID) to the 6-byte Site-ID.
- Added usage notes to the Subscriber HL segment.
- Moved the Temporary Identification Number (TIN) and the Foreign Identification Number (FIN) from Subscriber NM109 to the Reference Identification (REF) segment that follows it.
- Added usage notes to Subscriber NM1 that NM109 is only used for Patient ID.
- Added usage notes on formatting for SSN, TIN, or FIN to the Subscriber REF segment.
- Added usage notes to the Subscriber Demographic Information (DMG).
- Added usage notes to the Dependent HL segment.
- Added usage notes to the Dependent NM1 segment.
- Added usage notes to the Dependent REF segment.
- Added usage notes to the Dependent DMG segment.

271 Transaction:

- AAA Segment added at the Source HL.
- NM103 of the Source HL – Organization Name included changes of Defense Enrollment Eligibility Reporting System (DEERS) to DMDC (Defense Manpower Data Center) DEERS.
- AAA Segment added at the Source HL - NM1 Loop.
- AAA Segment added at the Receiver HL.
- NM103 of the Receiver HL – Organization Name: gray notes were altered, which stated the Trading Partner agreed upon value will be used [the Composite Health Care System (CHCS) 3-bytes Node code Name].
- NM109 of the Receiver HL – Identification Code: the DEERS value was changed from the EDI System ID to the 6-byte Site-ID.
- Added Loop ID indicators (i.e. 2000A, B, C, and D) where appropriate.
- Reduced the maximum use of the Trace (TRN) segment from 9 to 3 globally.
- Changed the AAA segment to optional globally
- Adjusted the AAA03 and AAA04 valid values globally in accordance to HIPAA.

Subscriber Hierarchical Level changes:

- HL04 Segment of the Subscriber HL gray notes was altered, explaining the appropriate value usage of [0,1].
- NM106 of the Subscriber HL – Name Prefix: the “Required by DEERS” notation was placed on the Rank Code.
- NM108 of the Subscriber HL – Identification Code Qualifier: value was changed from ZZ to MI.
- NM109 of the Subscriber HL – Identification Code: gray notes were altered, deleting the DEERS Family ID and Beneficiary ID. The NM109 changed from a 3-field concatenation to 2-field concatenation.
- NM109 of the Subscriber HL – Identification Code: Patient ID was changed from 9 to 10-bytes.
- REF02 of the Subscriber HL – Reference Identification: gray notes were altered, which deleted the Patient ID, the DEERS ID, the DEERS Family ID, and the Beneficiary ID.
- NM109 of the Subscriber LS Loop – Identification Code: was changed to a 3-field concatenation to include the Service Branch Classification Code, the Personnel Category Code, and the Unit Identification Code (UIC) remained as well.
- EB03 of the Health Care Coverage Loop code value list was expanded to include 35 for Dental, 88 for Pharmacy, and 30 for all inclusive benefit coverage code.
- EB04 of the Health Care Coverage Loop – Insurance Type Code: was added to include C1 code value to indicate commercial coverage.
- EB03 of the Primary Care Manager (PCM) Loop – Service Type Code: values 35 and 88 were removed.
- REF02 of the PCM EB Loop – REF was changed to a 2-field concatenation to include the PCM Enrolling Division Defense Medical Information System (DMIS) ID.
- NM108 of the PCM LS Loop – Identification Code Qualifier was changed to include only one value “SV”.
- The EB Loop for Other Health Insurance (OHI) was removed.
- EB04 of the Other Government Program (OGP) Loop – Insurance Type Code: the value list was reduced to exclude the “HN” value. EB04 of the (OGP) Loop – Insurance Type Code; value list reduced to exclude the “HN” value.
- The EB Loop for Non Availability of Services (NAS) was removed.
- Deleted REF segment at the Health Care Coverage EB Loop; moved the Health Care Delivery Program Plan Coverage Code to the EB05.
- Deleted (2) REF segments at the PCM EB Loop. Moved the Health Care Program Plan Coverage Code to the EB05. Moved the PCM Network Provided Type Code to the EB12. Moved the PCM Enrolling Division DMIS ID to the N406 as a 2-field concatenation.
- Altered the NM1 segment from Optional to Mandatory.

Dependent Hierarchical Level changes:

- HL04 Segment of the Dependent HL: gray notes were expanded to explain the appropriate value usage of [0,1].
- NM108 of the Dependent HL – Identification Code Qualifier: the value was changed from ZZ to MI.
- NM109 of the Dependent HL – Identification Code: gray notes were altered, which included deleting the DEERS Family ID and Beneficiary ID and changing the Patient ID length from 9 to 10-bytes.
- REF02 of the Dependent HL – REF: the DEERS ID and Patient ID were removed.
- INS02 of the Dependent HL – Individual Relationship Code was changed to include the four valid value codes.
- EB03 of the Health Care Coverage gray notes were expanded to include code value 30 that represents all inclusive Benefit Coverage selection.
- EB03 of the PCM Loop – Service Type Code was reduced to exclude 35 and 88 as valid code values.

- NM108 of the PCM EB Loop – Identification Code Qualifier was reduced to only include the “SV” code value.
- EB Loop for OHI was removed.
- EB03 Segment of the OGP Loop – Service Type Code was removed for consistency.
- EB04 Segment of the OGP Loop – Insurance Type Code: the value code was reduced to exclude the “HN” code value.
- EB Loop for NAS was removed.
- The trailing LE Segment was removed.
- Deleted REF segment at the Health Care Coverage EB Loop; moved the Health Care Delivery Program Plan Coverage Code to the EB05.
- Deleted two REF segments at the PCM EB Loop. Moved the Health Care Program Plan Coverage Code to the EB05. Moved the PCM Network Provided Type Code to the EB12. Moved the PCM Enrolling Division DMIS ID to the N406 as a 2-field concatenation.
- Altered the NM1 segment from optional to mandatory.
- Added Dependent’s Date, Time, and Period (DTP) segment person death calendar date.

275 - Patient Update:

- Changed NM109 for the Receiver from the EDI System ID to the 6-byte Site-ID.
- Corrected the Length value in BIN01.

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1. 270 Health Care Coverage for Military Treatment Facilities Inquiry

Functional Group ID=**HS**

Introduction:

This Draft Standard for Trial Use contains the format and establishes the data contents of the Eligibility, Coverage or Benefit Inquiry Transaction Set (270) for use within the context of an Electronic Data Interchange (EDI) environment. This transaction set can be used to inquire about the eligibility, coverages or benefits associated with a benefit plan, employer, plan sponsor, subscriber or a dependent under the subscriber's policy. The transaction set is intended to be used by all lines of insurance such as Health, Life, and Property and Casualty.

Notes:

This transaction set was developed using the 4010 version of X12 and the 4010X092 HIPAA Implementation Guide.

Heading:

	Pos.	Seg.		Req.		Loop	Notes and
	No.	ID	Name	Des.	Max.Use	Repeat	Comments
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	Pos.	Seg.		Req.		Loop	Notes and
	No.	ID	Name	Des.	Max.Use	Repeat	Comments
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
			LOOP ID - 2100A			1	
M	030	NM1	Individual or Organizational Name (Source)	M	1		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
M	030	NM1	Individual or Organizational Name (Receiver)	M	1		
			LOOP ID - 2000C			1	
M	010	HL	Hierarchical Level (Subscriber)	M	1		
			LOOP ID - 2100C			1	
M	030	NM1	Individual or Organizational Name (Subscriber)	M	1		

	040	REF	Reference Identification	O	1	
	100	DMG	Demographic Information	O	1	
			LOOP ID - 2110C		1	
	130	EQ	Eligibility or Benefit Inquiry (Subscriber)	O	1	
	200	DTP	Date or Time or Period	O	1	
			LOOP ID - 2000D		1	
	010	HL	Hierarchical Level (Dependent)	O	1	
			LOOP ID - 2100D		1	
M	030	NM1	Individual or Organizational Name (Dependent)	M	1	
Must Use	040	REF	Reference Identification	O	1	
	100	DMG	Demographic Information	O	1	
			LOOP ID - 2110D		1	
Must Use	130	EQ	Eligibility or Benefit Inquiry	O	1	
Must Use	200	DTP	Date or Time or Period	O	1	
M	210	SE	Transaction Set Trailer	M	1	

Segment: **ST** Transaction Set Header
Position: 010
Loop:
Level: Heading
Usage: Mandatory
Max Use: 1
Purpose: To indicate the start of a transaction set and to assign a control number
Syntax Notes:
Semantic Notes: 1 The transaction set identifier (ST01) is used by the translation routines of the interchange partners to select the appropriate transaction set definition (e.g., 810 selects the Invoice Transaction Set).
Comments:

Data Element Summary

	<u>Ref.</u>	<u>Data</u>		<u>Attributes</u>
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	
M	ST01	143	Transaction Set Identifier Code	M ID 3/3
			Code uniquely identifying a Transaction Set	
			270 Eligibility, Coverage or Benefit Inquiry	
M	ST02	329	Transaction Set Control Number	M AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
			Must be same as SE02	

Segment: **BHT** Beginning of Hierarchical Transaction

Position: 020

Loop:

Level: Heading

Usage: Mandatory

Max Use: 1

Purpose: To define the business hierarchical structure of the transaction set and identify the business application purpose and reference data, i.e., number, date, and time

Syntax Notes:

- Semantic Notes:**
- 1 BHT03 is the number assigned by the originator to identify the transaction within the originator's business application system.
 - 2 BHT04 is the date the transaction was created within the business application system.
 - 3 BHT05 is the time the transaction was created within the business application system.

Comments:

Data Element Summary

	<u>Ref.</u>	<u>Data</u>	<u>Name</u>	<u>Attributes</u>
	<u>Des.</u>	<u>Element</u>		
M	BHT01	1005	Hierarchical Structure Code	M ID 4/4
			Code indicating the hierarchical application structure of a transaction set that utilizes the HL segment to define the structure of the transaction set	
			0022 Information Source, Information Receiver, Subscriber, Dependent	
M	BHT02	353	Transaction Set Purpose Code	M ID 2/2
			Code identifying purpose of transaction set	
			13 Request	
Must Use	BHT03	127	Reference Identification	O AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			Electronic Data Interchange Message Control Identifier	
			DEERS Length = 20	
			This EDI Message Control Identifier serves as the linkage between the 270 Inquiry and the 271 Response. This number will be returned on the BHT03 of the 271 Response.	
Must Use	BHT04	373	Date	O DT 8/8
			Date expressed as CCYYMMDD	
			Transaction Online Calendar Date	
			DEERS Length=8	
Must Use	BHT05	337	Time (HHMMSS)	O TM 4/8

Time expressed in 24-hour clock time as follows: HHMM, or HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds; decimal seconds are expressed as follows: D = tenths (0-9) and DD = hundredths (00-99)

Transaction Online Time

DEERS Length=6

Segment: **HL** Hierarchical Level (Source)

Position: 010

Loop: 2000A Mandatory

Level: Detail

Usage: Mandatory

Max Use: 1

Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data			Attributes
			<u>Element</u>	<u>Name</u>	
M	HL01	628		Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure		
			1	Sequential Number	
M	HL03	735		Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure		
			20	Information Source	
			Identifies the payor, maintainer, or source of the information		
Must Use	HL04	736		Hierarchical Child Code	O ID 1/1
			Code indicating if there are hierarchical child data segments subordinate to the level being described		
			Required by DEERS		

- 1 Additional Subordinate HL Data Segment in This Hierarchical Structure.

Segment: **NM1** Individual or Organizational Name (Source)
Position: 030
Loop: 2100A Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			P5 Plan Sponsor	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			2 Non-Person Entity	
Rec	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			DMDCDEER	
			S	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS	
			46 Electronic Transmitter Identification Number (ETIN)	
			A unique number assigned to each transmitter and software developer	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS	
			DMDCDEERS1600NB	

Segment: **HL** Hierarchical Level (Receiver)
Position: 010
Loop: 2000B Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		2	Incremental	
Must Use	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	
			Required by DEERS	
		1	Identifies the hierarchical level to which this level is subordinate	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		21	Information Receiver	

			Identifies the provider or party(ies) who are the recipient(s) of the information	
Must Use	HL04	736	Hierarchical Child Code	O ID 1/1
			Code indicating if there are hierarchical child data segments subordinate to the level being described	
			Required by DEERS	
		1	Additional Subordinate HL Data Segment in This Hierarchical Structure.	

Segment: **NM1** Individual or Organizational Name (Receiver)
Position: 030
Loop: 2100B Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			1P Provider	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			2 Non-Person Entity	
Rec	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS	
			SV Service Provider Number	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Health Care Delivery Program Site Identifier	
			DEERS Length=6	
			Required by DEERS	

Segment: **HL** Hierarchical Level (Subscriber)
Position: 010
Loop: 2000C Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Notes: This HL level is used to pass Search Criteria for the Sponsor.

This HL level is required. However, it may contain limited segments and elements if the query is originated for a dependent. Specifically this HL and Sponsor's Name (NM1) segments, with their mandatory data elements are required.

When using both Sponsor and Dependent's information as search criteria, this HL is used to convey the search Sponsor's search criteria such as Sponsor's SSN, Sponsor's Last Name, etc.

Data Element Summary

	Ref.	Data		Attributes
		<u>Element</u>	<u>Name</u>	
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
			3 Incremental	
Must Use	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data	

			segment being described is subordinate to	
			Required by DEERS	
		2	Identifies the hierarchical level to which this level is subordinate	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		22	Subscriber	
			Identifies the employee or group member who is covered for insurance and to whom, or on behalf of whom, the insurer agrees to pay benefits	
Must Use	HL04	736	Hierarchical Child Code	O ID 1/1
			Code indicating if there are hierarchical child data segments subordinate to the level being described	
			This data element tells if this is a sponsor or dependent inquiry. BHT01 indicates that the levels will occur in the following order: Source, Receiver, Subscriber and Dependent.	
			A "0" indicates another HL will not follow this Subscriber HL, and because of BHT01, specifically a Dependent HL will not follow. From this we know that the inquiry is made on the Sponsor.	
			A "1" indicates a subordinate HL will follow this Subscriber HL, and because of the BHT01 we know it will be dependent HL and that the inquiry will be made on the dependent.	
			Required by DEERS	
		0	No Subordinate HL Segment in This Hierarchical Structure.	
			(Implies that this inquiry is made for the Sponsor)	
		1	Additional Subordinate HL Data Segment in This Hierarchical Structure.	
			(Implies that this inquiry is made for the Dependent)	

Segment:	NM1 Individual or Organizational Name (Subscriber)
Position:	030
Loop:	2100C Mandatory
Level:	Detail
Usage:	Mandatory
Max Use:	1
Purpose:	To supply the full name of an individual or organizational entity
Syntax Notes:	1 If either NM108 or NM109 is present, then the other is required. 2 If NM111 is present, then NM110 is required.
Semantic Notes:	1 NM102 qualifies NM103.
Comments:	1 NM110 and NM111 further define the type of entity in NM101.
Notes:	Use NM108 / NM109 when Inquiring on a Subscriber by using the Patient ID.

Data Element Summary

Ref.	Des.	Data Element	Name	Attributes
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			IL Insured or Subscriber	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			1 Person	
	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Person Last Name DEERS Length=26	
			Used when Sponsor's Last Name is part of the search criteria.	
	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Used when Patient ID is part of the search criteria.	
			MI Member Identification Number	
	NM109	67	Identification Code (Patient ID)	X AN 2/80
			Code identifying a party or other code	
			Inquiry Person Identifier DEERS Length=11	
			Used when Patient ID is part of the search criteria.	

Segment:	REF Reference Identification
Position:	040
Loop:	2100C Mandatory
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	Used when an ID other than the Patient ID is used as part of the search criteria.
Syntax Notes:	<ol style="list-style-type: none"> 1 At least one of REF02 or REF03 is required. 2 If either C04003 or C04004 is present, then the other is required. 3 If either C04005 or C04006 is present, then the other is required.
Semantic Notes:	<ol style="list-style-type: none"> 1 REF04 contains data relating to the value cited in REF02.
Comments:	
Notes:	Used when an ID other than the Patient ID is used as part of the search criteria.

Data Element Summary

	<u>Ref.</u>	<u>Data</u>	<u>Name</u>	<u>Attributes</u>
	<u>Des.</u>	<u>Element</u>		
M	REF01	128	Reference Identification Qualifier	M ID 2/3
			Code qualifying the Reference Identification	
			HJ Identity Card Number	
			Number assigned to an individual by a government	
			Indicates that REF 02 contains the TIN or FIN prefixed with a "D" or "F" accordingly to indicate which ID type it is.	
			SY Social Security Number	
			Indicates that REF02 contains the 9 digit SSN	
Must Use	REF02	127	Reference Identification	X AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			For SSN:	
			Inquiry Person Identifier	
			DEERS Length=11	
			Use 9 digit SSN only, do not pad with zeros or spaces	
			For TIN or FIN:	
			(2 field concatenation)	
			D- Temporary ID (TIN)	
			F- Foreign ID (FIN)	
			Inquiry Person ID Type Code	
			DEERS Length = 1	

Inquiry Person Identifier
DEERS Length=11

Segment: DMG Demographic Information**Position:** 100**Loop:** 2100C Mandatory**Level:** Detail**Usage:** Optional**Max Use:** 1**Purpose:** Used when Sponsor Date of Birth is part of search criteria**Syntax Notes:** 1 If either DMG01 or DMG02 is present, then the other is required.**Semantic Notes:** 1 DMG02 is the date of birth.

2 DMG07 is the country of citizenship.

3 DMG09 is the age in years.

Comments:**Notes:** Used when Sponsor Date of Birth is part of search criteria**Data Element Summary**

	<u>Ref.</u>	<u>Data</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
Must Use	DMG01	1250		Date Time Period Format Qualifier	X ID 2/3
				Code indicating the date format, time format, or date and time format	
				D8 Date Expressed in Format CCYYMMDD	
Must Use	DMG02	1251		Date Time Period	X AN 1/35
				Expression of a date, a time, or range of dates, times or dates and times	
				Person Birth Calendar Date	
				DEERS Length=8	
				Use when Sponsor's Date of Birth is part of the search criteria.	

Segment: **EQ** Eligibility or Benefit Inquiry (Subscriber)
Position: 130
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify inquired eligibility or benefit information
Syntax Notes: 1 At least one of EQ01 or EQ02 is required.
Semantic Notes:
Comments:
Notes: This is required when making a inquiry on a Sponsor

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
Must Use	EQ01	1365	Service Type Code	X ID 1/2
			Code identifying the classification of service	
			M- Medical	
			? - All Benefits	
			D - Dental	
			P - BRAC Pharmacy	
			Health Care Delivery Program Type Code	
			DEERS Length=1	
		1	Medical Care	
			Medical Inquiry	
		30	Health Benefit Plan Coverage	
			All Benefits	
		35	Dental Care	
			Dental Inquiry	
		88	Pharmacy	
			Pharmacy Inquiry	
Must Use	EQ03	1207	Coverage Level Code	O ID 3/3
			Code indicating the level of coverage being provided for this insured	
			Person/Family Transaction Type Code	
			DEERS Length=1	
			FAM Family	
			IND Individual	
Must Use	EQ04	1336	Insurance Type Code	O ID 1/3
			Code identifying the type of insurance policy within a specific insurance program	

C1	Commercial
	(Eligibility)

Segment: **DTP** **Date or Time or Period**
Position: 200
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:
Notes: Required for Sponsor Inquiry

Data Element Summary

Ref.	Data			
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>	
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
		307	Eligibility	
			Range of dates when the subscriber or dependent were eligible for benefits	
			(Indicates an Eligibility Inquiry)	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
		RD8	Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD	
			A range of dates expressed in the format CCYYMMDD-CCYYMMDD where CCYY is the numerical expression of the century CC and year YY, MM is the numerical expression of the month within the year, and DD is the numerical expression of the day within the year; the first occurrence of CCYYMMDD is the beginning date and the second occurrence is the ending date	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Health Care Coverage Inquiry Period Begin Calendar Date	
			DEERS Length=8	
			-	
			Health Care Coverage Inquiry Period End Calendar Date	
			DEERS Length=8	

Segment: **HL** Hierarchical Level (Dependent)
Position: 010
Loop: 2000D Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Notes: This HL is used to specify Inquiry Information for a Dependent

This HL loop is optional. It is used only when a query is for a Dependent.

In the cases where search criteria of both the Sponsor and Dependent are used, only search criteria for the Dependent should be specified in this HL. Search criteria for the Sponsor should be specified in the Subscriber HL.

Required by DEERS

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		4	Incremental	
Must Use	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	

M	HL03	735	3	Identifies the hierarchical level to which this level is subordinate	M	ID 1/2
				Hierarchical Level Code		
				Code defining the characteristic of a level in a hierarchical structure		
			23	Dependent		
				Identifies the individual who is affiliated with the subscriber, such as spouse, child, etc., and therefore may be entitled to benefits		
Must Use	HL04	736		Hierarchical Child Code	O	ID 1/1
				Code indicating if there are hierarchical child data segments subordinate to the level being described		
				Required by DEERS		
			0	No Subordinate HL Segment in This Hierarchical Structure.		

Segment: **NM1** Individual or Organizational Name (Dependent)
Position: 030
Loop: 2100D Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			03 Dependent	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			1 Person	
Dep	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Person Last Name	
			DEERS Length=26	
			Used when Dependent's Last Name is part of the search criteria.	
Dep	NM104	1036	Name First	O AN 1/25
			Individual first name	
			Person First Name	
			DEERS Length = 20	
			Used when Dependent's First Name is part of the Search Criteria.	
			This data element should include the 1st five characters of the Dependents First Name.	

Segment:	REF Reference Identification
Position:	040
Loop:	2100D Mandatory
Level:	Detail
Usage:	Optional (Must Use)
Max Use:	1
Purpose:	Used when an ID (Patient, TIN, FIN, SSN) of a dependent is part of the search criteria.
Syntax Notes:	<ol style="list-style-type: none"> 1 At least one of REF02 or REF03 is required. 2 If either C04003 or C04004 is present, then the other is required. 3 If either C04005 or C04006 is present, then the other is required.
Semantic Notes:	<ol style="list-style-type: none"> 1 REF04 contains data relating to the value cited in REF02.
Comments:	
Notes:	Used when an ID (Patient, TIN, FIN, SSN) of a dependent is part of the search criteria.

Data Element Summary

	<u>Ref.</u>	<u>Data</u>	<u>Name</u>	<u>Attributes</u>
	<u>Des.</u>	<u>Element</u>		
M	REF01	128	Reference Identification Qualifier	M ID 2/3
			Code qualifying the Reference Identification	
			HJ Identity Card Number	
			Number assigned to an individual by a government	
			Used for all IDs except SSN	
			Indicated that REF02 contains a two-field concatenation of the ID type followed by the ID.	
			SY Social Security Number	
			Indicates that REF02 only contains a 9 digit SSN of the dependent	
Must Use	REF02	127	Reference Identification	X AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			For SSN (REF01 =SY):	
			Inquiry Person Identifier	
			DEERS Length=11	
			9 digit SSN only, do not pad with zeros or spaces	
			For all other ID's (REF01 = HJ):	
			(2-field concatenation)	

M= Patient ID
D= Temporary ID
F= Foreign Identification

Inquiry Person Identifier Type Code
DEERS Length=1

Inquiry Person Identifier
DEERS Length=11

Segment: DMG Demographic Information**Position:** 100**Loop:** 2100D Mandatory**Level:** Detail**Usage:** Optional**Max Use:** 1**Purpose:** This segment is only used when Dependent's Date of Birth is part of the search criteria.**Syntax Notes:** 1 If either DMG01 or DMG02 is present, then the other is required.**Semantic Notes:** 1 DMG02 is the date of birth.

2 DMG07 is the country of citizenship.

3 DMG09 is the age in years.

Comments:**Notes:** This segment is only used when Dependent's Date of Birth is part of the search criteria.**Data Element Summary**

	Ref.	Data			Attributes
		<u>Element</u>	<u>Name</u>		
Must Use	DMG01	1250	Date Time Period Format Qualifier	X	ID 2/3
			Code indicating the date format, time format, or date and time format		
			D8 Date Expressed in Format CCYYMMDD		
Must Use	DMG02	1251	Date Time Period	X	AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times		
			Person Birth Calendar Date		
			DEERS Length=8		

Segment: **EQ** Eligibility or Benefit Inquiry

Position: 130

Loop: 2110D Optional (Must Use)

Level: Detail

Usage: Optional (Must Use)

Max Use: 1

Purpose: To specify inquired eligibility or benefit information

Syntax Notes: 1 At least one of EQ01 or EQ02 is required.

Semantic Notes:

Comments:

Notes: Required when Inquiry is for a dependent

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
Must Use	EQ01	1365	Service Type Code	X ID 1/2
			Code identifying the classification of service	
			M-Medical	
			P-BRAC Pharmacy	
			?-All Benefits	
			D-Dental	
			Health Care Delivery Program Type Code	
			DEERS Length=1	
			1 Medical Care	
			Medical Inquiry	
			30 Health Benefit Plan Coverage	
			All Benefits Inquiry	
			35 Dental Care	
			Dental Inquiry	
			88 Pharmacy	
			Pharmacy Inquiry	
Must Use	EQ03	1207	Coverage Level Code	O ID 3/3
			Code indicating the level of coverage being provided for this insured	
			Person/Family Transaction Type Code	
			DEERS Length=1	
			FAM Family	
			IND Individual	
Must Use	EQ04	1336	Insurance Type Code	O ID 1/3
			Code identifying the type of insurance policy within a specific insurance program	

C1	Commercial
	(Eligibility)

Segment: **DTP** **Date or Time or Period**
Position: 200
Loop: 2110D Optional (Must Use)
Level: Detail
Usage: Optional (Must Use)
Max Use: 1
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data			Attributes
			<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	DTP01	374		Date/Time Qualifier	M ID 3/3
				Code specifying type of date or time, or both date and time	
				307 Eligibility	
				Range of dates when the subscriber or dependent were eligible for benefits	
M	DTP02	1250		Date Time Period Format Qualifier	M ID 2/3
				Code indicating the date format, time format, or date and time format	
				RD8 Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD	
				A range of dates expressed in the format CCYYMMDD-CCYYMMDD where CCYY is the numerical expression of the century CC and year YY, MM is the numerical expression of the month within the year, and DD is the numerical expression of the day within the year; the first occurrence of CCYYMMDD is the beginning date and the second occurrence is the ending date	
M	DTP03	1251		Date Time Period	M AN 1/35
				Expression of a date, a time, or range of dates, times or dates and times	
				Health Care Delivery Program Eligibility Inquiry Period Begin Calendar Date DEERS Length=8	
				-	
				Health Care Delivery Program Eligibility Inquiry Period End Calendar Date DEERS Length=8	

Segment: **SE** Transaction Set Trailer
Position: 210
Loop:
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments)
Syntax Notes:
Semantic Notes:
Comments: 1 SE is the last segment of each transaction set.

Data Element Summary

	Ref.	Data		<u>Attributes</u>
		<u>Des.</u>	<u>Element Name</u>	
M	SE01	96	Number of Included Segments	M N0 1/10
			Total number of segments included in a transaction set including ST and SE segments	
M	SE02	329	Transaction Set Control Number	M AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
			Must be same as ST02	

2. 271 Transaction

2.1. 271 Military Treatment Facility (MTF) Inquiry Response

Functional Group ID=**HB**

Introduction:

This Draft Standard for Trial Use contains the format and establishes the Eligibility, Coverage, or Benefit Information Transaction Set (271) data contents for use within the context of an Electronic Data Interchange (EDI) environment. This transaction set can be used to communicate information about or changes to eligibility, coverage, or benefits from information sources, such as insurers, sponsors, and payors, to information receivers, such as physicians, hospitals, repair facilities, third party administrators, and governmental agencies. This information includes but is not limited to benefit status, explanation of benefits, coverage(s), dependent coverage level, effective dates, co-insurance amounts, co-pays, deductibles, exclusions and limitations.

Notes:

This transaction was developed using the 4010 version of the X12 and HIPAA Implementation Guidelines.
[271MTFRE]

Heading:

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
	025	AAA	Request Validation (Optional)	O	9		
			LOOP ID - 2100A			1	
M	030	NM1	Individual or Organizational Name	M	1		
	085	AAA	Request Validation	O	9		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
M	030	NM1	Individual or Organizational Name	M	1		
	085	AAA	Request Validation	O	9		
			LOOP ID - 2000C			1	

M	010	HL	Hierarchical Level (Subscriber)	M	1	
	020	TRN	Trace (Optional)	O	3	n1
M	LOOP ID - 2100C					1
	030	NM1	Individual or Organizational Name (Subscriber)	M	1	
	040	REF	Reference Identification	O	9	
	040	REF	Reference Identification	O	9	
	060	N3	Address Information	O	1	
	070	N4	Geographic Location	O	1	
	080	PER	Administrative Communications Contact	O	3	
	085	AAA	Request Validation (Optional)	O	9	
	100	DMG	Demographic Information	O	1	
	110	INS	Insured Benefit	O	1	
	120	DTP	Date or Time or Period	O	9	
	LOOP ID - 2110C					>1
	130	EB	Eligibility or Benefit Information (Personnel Data)	O	1	
	330	LS	Loop Header	O	1	
	LOOP ID - 2120C					1
	340	NM1	Individual or Organizational Name	O	1	
	370	N4	Geographic Location	O	1	
	400	LE	Loop Trailer	O	1	
	LOOP ID - 2110C					>1
	130	EB	Eligibility or Benefit Information (Health Care Coverage)	O	1	
	150	DTP	Date or Time or Period	O	20	
	150	DTP	Date or Time or Period	O	20	
	160	AAA	Request Validation (Optional)	O	9	
	250	MSG	Message Text	O	10	
	LOOP ID - 2110C					>1
	130	EB	Eligibility or Benefit Information (Primary Care Manager)	O	1	
	150	DTP	Date or Time or Period	O	20	
	150	DTP	Date or Time or Period	O	20	
330	LS	Loop Header	O	1		
LOOP ID - 2120C					1	
340	NM1	Individual or Organizational Name (Entity-Primary Care Manager)	O	1		
370	N4	Geographic Location	O	1		
380	PER	Administrative Communications Contact	O	3		
400	LE	Loop Trailer	O	1		
LOOP ID - 2110C					>1	
130	EB	Eligibility or Benefit Information (Other Government Program)	O	1		
150	DTP	Date or Time or Period	O	20		
150	DTP	Date or Time or Period	O	20		

		LOOP ID - 2000D			>1
010	HL	Hierarchical Level (Dependent)	O	1	
020	TRN	Trace (Optional)	O	3	n2
		LOOP ID - 2100D			>1
030	NM1	Individual or Organizational Name (Dependent)	R	1	
040	REF	Reference Identification	O	9	
060	N3	Address Information	O	1	
070	N4	Geographic Location	O	1	
080	PER	Administrative Communications Contact	O	3	
085	AAA	Request Validation (Optional)	O	9	
100	DMG	Demographic Information	O	1	
110	INS	Insured Benefit	O	1	
		LOOP ID - 2110D			>1
130	EB	Eligibility or Benefit Information (Health Care Coverage)	O	1	
150	DTP	Date or Time or Period	O	20	
150	DTP	Date or Time or Period	O	20	
160	AAA	Request Validation	O	9	
250	MSG	Message Text	O	10	
		LOOP ID - 2110D			>1
130	EB	Eligibility or Benefit Information (Primary Care Manager)	O	1	
150	DTP	Date or Time or Period	O	20	
150	DTP	Date or Time or Period	O	20	
330	LS	Loop Header	O	1	
		LOOP ID - 2120D			1
340	NM1	Individual or Organizational Name (Entity-Primary Care Manager)	O	1	
370	N4	Geographic Location	O	1	
380	PER	Administrative Communications Contact	O	3	
400	LE	Loop Trailer	O	1	
		LOOP ID - 2110D			>1
130	EB	Eligibility or Benefit Information (Other Government Program)	O	1	
150	DTP	Date or Time or Period	O	20	
150	DTP	Date or Time or Period	O	20	
M	410	SE	Transaction Set Trailer	M	1

Transaction Set Notes

1. If the Eligibility, Coverage or Benefit Inquiry Transaction Set (270) includes a TRN segment, then the Eligibility, Coverage or Benefit Information Transaction Set (271) must return the trace number identified in the TRN segment.

2. If the Eligibility, Coverage or Benefit Inquiry Transaction Set (270) includes a TRN segment, then the Eligibility, Coverage or Benefit Information Transaction Set (271) must return the trace number identified in the TRN segment.

Segment:	ST Transaction Set Header
Position:	010
Loop:	
Level:	Heading
Usage:	Mandatory
Max Use:	1
Purpose:	To indicate the start of a transaction set and to assign a control number
Syntax Notes:	
Semantic Notes:	1 The transaction set identifier (ST01) is used by the translation routines of the interchange partners to select the appropriate transaction set definition (e.g., 810 selects the Invoice Transaction Set).
Comments:	

Data Element Summary

	Ref.	Data		Attributes
	Des.	Element	Name	
M	ST01	143	Transaction Set Identifier Code	M ID 3/3
			Code uniquely identifying a Transaction Set	
			271 Eligibility, Coverage or Benefit Information	
M	ST02	329	Transaction Set Control Number	M AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	

Segment: **BHT** Beginning of Hierarchical Transaction

Position: 020

Loop:

Level: Heading

Usage: Mandatory

Max Use: 1

Purpose: To define the business hierarchical structure of the transaction set and identify the business application purpose and reference data, i.e., number, date, and time

Syntax Notes:

- Semantic Notes:**
- 1 BHT03 is the number assigned by the originator to identify the transaction within the originator's business application system.
 - 2 BHT04 is the date the transaction was created within the business application system.
 - 3 BHT05 is the time the transaction was created within the business application system.

Comments:

Data Element Summary

	Ref.	Data	Attributes
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	BHT01	1005 Hierarchical Structure Code	M ID 4/4
		Code indicating the hierarchical application structure of a transaction set that utilizes the HL segment to define the structure of the transaction set	
		0022 Information Source, Information Receiver, Subscriber, Dependent	
M	BHT02	353 Transaction Set Purpose Code	M ID 2/2
		Code identifying purpose of transaction set	
		11 Response	
Must Use	BHT03	127 Reference Identification	O AN 1/30
		Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
		Required by HIPAA.	
		This field will return the data value entered in the BHT03 of the 270 Inquiry	
		Submitter Transaction Number [Trace Number <or> (ISA, GS, ST Control Numbers)]	
		Electronic Data Interchange Message Control Identifier	
		DEERS Length=20	
Must Use	BHT04	373 Date	O DT 8/8
		Date expressed as CCYYMMDD	
		Required by DEERS/HIPAA.	
		Transaction Online Calendar Date	

Must Use	BHT05	337	<div data-bbox="607 186 1380 222">DEERS Length=8</div> <div data-bbox="607 222 1380 258"> Time <div data-bbox="1208 222 1380 258">O TM 4/8</div> </div> <div data-bbox="607 258 1380 373"> Time expressed in 24-hour clock time as follows: HHMM, or HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds; decimal seconds are expressed as follows: D = tenths (0-9) and DD = hundredths (00-99) </div> <div data-bbox="607 373 1380 409">Required by DEERS/HIPAA.</div> <div data-bbox="607 445 1380 512"> Transaction Online Time DEERS Length=6 </div>
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Segment: **HL** Hierarchical Level (Source)

Position: 010

Loop: 2000A Mandatory

Level: Detail

Usage: Mandatory

Max Use: 1

Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	HL01	628	Hierarchical ID Number A unique number assigned by the sender to identify a particular data segment in a hierarchical structure 1 Sequential	M AN 1/12
M	HL03	735	Hierarchical Level Code Code defining the characteristic of a level in a hierarchical structure 20 Information Source Identifies the payor, maintainer, or source of the information	M ID 1/2
Must Use	HL04	736	Hierarchical Child Code Code indicating if there are hierarchical child data segments subordinate to the level being described Required by DEERS/HIPAA. 1 Additional Subordinate HL Data Segment in This	O ID 1/1

Hierarchical Structure.

Segment: **AAA** Request Validation (Optional)
Position: 025
Loop: 2000A Mandatory
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	AAA01	1073	Yes/No Condition or Response Code Code indicating a Yes or No condition or response N No Y Yes	M ID 1/1
Must Use	AAA03	901	Reject Reason Code Code assigned by issuer to identify reason for rejection 04 Authorized Quantity Exceeded 41 Authorization/Access Restrictions 42 Unable to Respond at Current Time 79 Invalid Participant Identification	O ID 2/2
Must Use	AAA04	889	Follow-up Action Code Code identifying follow-up actions allowed C Please Correct and Resubmit	O ID 1/1

Segment: **NM1** Individual or Organizational Name
Position: 030
Loop: 2100A Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code Code identifying an organizational entity, a physical location, property or an individual P5 Plan Sponsor	M ID 2/3
M	NM102	1065	Entity Type Qualifier Code qualifying the type of entity 2 Non-Person Entity	M ID 1/1
Dep	NM103	1035	Name Last or Organization Name Individual last name or organizational name DMDCDEER DMDC Defense Eligibility and Enrollment System S	O AN 1/35
Must Use	NM108	66	Identification Code Qualifier Code designating the system/method of code structure used for Identification Code (67) Required by DEERS/HIPAA.	X ID 1/2
		46	Electronic Transmitter Identification Number (ETIN) A unique number assigned to each transmitter and software developer	
Must Use	NM109	67	Identification Code Code identifying a party or other code	X AN 2/80

Segment: **AAA** Request Validation
Position: 085
Loop: 2100A Mandatory
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
			N No	
			Y Yes	
Must Use	AAA03	901	Reject Reason Code	O ID 2/2
			Code assigned by issuer to identify reason for rejection	
			04 Authorized Quantity Exceeded	
			41 Authorization/Access Restrictions	
			42 Unable to Respond at Current Time	
			79 Invalid Participant Identification	
			80 No Response received - Transaction Terminated	
			T4 Payer Name or Identifier Missing	
Must Use	AAA04	889	Follow-up Action Code	O ID 1/1
			Code identifying follow-up actions allowed	
			C Please Correct and Resubmit	

Segment: **HL** Hierarchical Level (Receiver)
Position: 010
Loop: 2000B Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		
	Des.	Element	Name	Attributes
M	HL01	628	Hierarchical ID Number A unique number assigned by the sender to identify a particular data segment in a hierarchical structure 2 Incremental	M AN 1/12
Must Use	HL02	734	Hierarchical Parent ID Number Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to Required by DEERS/HIPAA. 1 Identifies that the hierarchical level to which this level is subordinate	O AN 1/12
M	HL03	735	Hierarchical Level Code Code defining the characteristic of a level in a hierarchical structure 21 Information Receiver Identifies the provider or party(ies) who are the recipient(s) of the information	M ID 1/2

Must Use	HL04	736	Hierarchical Child Code	O ID 1/1
Code indicating if there are hierarchical child data segments subordinate to the level being described				
Required by DEERS/HIPAA.				
1 Additional Subordinate HL Data Segment in This Hierarchical Structure.				

Segment: **NM1** Individual or Organizational Name
Position: 030
Loop: 2100B Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code Code identifying an organizational entity, a physical location, property or an individual IP Provider	M ID 2/3
M	NM102	1065	Entity Type Qualifier Code qualifying the type of entity 2 Non-Person Entity	M ID 1/1
Must Use	NM103	1035	Name Last or Organization Name Individual last name or organizational name Required by DEERS. Trading Partner defined value.	O AN 1/35
Must Use	NM108	66	Identification Code Qualifier Code designating the system/method of code structure used for Identification Code (67) Required by DEERS/HIPAA. SV Service Provider Number	X ID 1/2
Must Use	NM109	67	Identification Code Code identifying a party or other code Required by DEERS/HIPAA. (Assigned by DEERS) Site ID DEERS Length=6	X AN 2/80

Segment: **AAA** Request Validation
Position: 085
Loop: 2100B Mandatory
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	AAA01	1073	Yes/No Condition or Response Code Code indicating a Yes or No condition or response N No Y Yes	M ID 1/1
Must Use	AAA03	901	Reject Reason Code Code assigned by issuer to identify reason for rejection 15 Required application data missing 41 Authorization/Access Restrictions	O ID 2/2
Must Use	AAA04	889	Follow-up Action Code Code identifying follow-up actions allowed C Please Correct and Resubmit	O ID 1/1

Segment: **HL** Hierarchical Level (Subscriber)
Position: 010
Loop: 2000C Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		
	Des.	Element	Name	Attributes
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		3	Incremental	
Must Use	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	
		2	Identifies the hierarchical level to which the level is subordinate	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		22	Subscriber	
			Identifies the employee or group member who is covered for insurance and to whom, or on behalf of whom, the insurer agrees to pay benefits	

Must Use	HL04	736	Hierarchical Child Code Code indicating if there are hierarchical child data segments subordinate to the level being described Required by DEERS/HIPAA. Note: If Subscriber/Sponsor individual response is being returned the value of "0" should be used. If a family member or multiple dependents are being returned the value of "1" should be used. Refer to 004010 Data Element Dictionary for acceptable code values.	O ID 1/1
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Segment: **TRN** Trace (Optional)

Position: 020

Loop: 2000C Mandatory

Level: Detail

Usage: Optional

Max Use: 3

Purpose: To uniquely identify a transaction to an application

Syntax Notes:

Semantic Notes:

- 1 TRN02 provides unique identification for the transaction.
- 2 TRN03 identifies an organization.
- 3 TRN04 identifies a further subdivision within the organization.

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	TRN01	481	Trace Type Code Code identifying which transaction is being referenced 2 Referenced Transaction Trace Numbers	M ID 1/2
M	TRN02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Reserved for discussion. Submitter Transaction Number [Trace Number <or> (ISA, GS, ST Control Numbers)] Electronic Data Interchange Message Control Number DEERS Length=20	M AN 1/30
Must Use	TRN03	509	Originating Company Identifier A unique identifier designating the company initiating the funds transfer instructions. The first character is one-digit ANSI identification code designation (ICD) followed by the nine-digit identification number which may be an IRS employer identification number (EIN), data universal numbering system (DUNS), or a user assigned number; the ICD for an EIN is 1, DUNS is 3, user assigned number is 9 Reserved for discussion.	O AN 10/10
Dep	TRN04	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Reserved for discussion.	O AN 1/30

Segment: **NM1** Individual or Organizational Name (Subscriber)
Position: 030
Loop: 2100C Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code Code identifying an organizational entity, a physical location, property or an individual IL Insured or Subscriber	M ID 2/3
M	NM102	1065	Entity Type Qualifier Code qualifying the type of entity 1 Person	M ID 1/1
Must Use	NM103	1035	Name Last or Organization Name Individual last name or organizational name Required by DEERS. Person Last Name DEERS Length=26	O AN 1/35
Must Use	NM104	1036	Name First Individual first name Required by DEERS. Person First Name DEERS Length=20	O AN 1/25
Dep	NM105	1037	Name Middle Individual middle name or initial Person Middle Name DEERS Length=20	O AN 1/25
Must Use	NM106	1038	Name Prefix Prefix to individual name Required by DEERS.	O AN 1/10

Dep	NM107	1039	Rank Code			
			DEERS Length=6			
			Name Suffix		O	AN 1/10
			Suffix to individual name			
Must Use	NM108	66	Person Cadency Name			
			DEERS Length=4			
			Identification Code Qualifier		X	ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)			
			Required by DEERS.			
Must Use	NM109	67	MI Member Identification Number			
			Identification Code		X	AN 2/80
			Code identifying a party or other code			
			Required by DEERS.			
			(2 field concatenation)			
			P=Patient ID			
			Person Identifier Type Code			
			DEERS Length=1			
			Patient Identifier			
			DEERS Length=10			

Segment: **REF** **Reference Identification**

Position: 040

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 9

Purpose: To specify identifying information

Syntax Notes:

- 1 At least one of REF02 or REF03 is required.
- 2 If either C04003 or C04004 is present, then the other is required.
- 3 If either C04005 or C04006 is present, then the other is required.

Semantic Notes:

- 1 REF04 contains data relating to the value cited in REF02.

Comments:

Data Element Summary

	<u>Ref.</u> <u>Des.</u>	<u>Data</u> <u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier Code qualifying the Reference Identification HJ Identity Card Number Number assigned to an individual by a government SY Social Security Number	M ID 2/3
Must Use	REF02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Required by DEERS. (2 Field concatenation) when using HJ in REF01. D or T= Temporary ID F= Foreign Identification <or> Social Security Number Person Identifier Type Code DEERS Length=1 Person Identifier DEERS Length=11	X AN 1/30

Segment: **REF** **Reference Identification**
Position: 040
Loop: 2100C Mandatory
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify identifying information
Syntax Notes:

- 1 At least one of REF02 or REF03 is required.
- 2 If either C04003 or C04004 is present, then the other is required.
- 3 If either C04005 or C04006 is present, then the other is required.

Semantic Notes:

- 1 REF04 contains data relating to the value cited in REF02.

Comments:

Data Element Summary

	<u>Ref.</u> <u>Des.</u>	<u>Data</u> <u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier Code qualifying the Reference Identification ML Military Rank/Civilian Pay Grade Number	M ID 2/3
Must Use	REF02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Pay Grade Code DEERS Length=2	X AN 1/30

Segment: **N3** Address Information
Position: 060
Loop: 2100C Mandatory
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify the location of the named party
Syntax Notes:
Semantic Notes:
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	N301	166	Address Information Address information Mailing Address Line 1 Text DEERS Length=40	M AN 1/55
Dep	N302	166	Address Information Address information Mailing Address Line 2 Text DEERS Length=40	O AN 1/55

Segment:	N4 Geographic Location
Position:	070
Loop:	2100C Mandatory
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To specify the geographic place of the named party
Syntax Notes:	1 If N406 is present, then N405 is required.
Semantic Notes:	
Comments:	1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location. 2 N402 is required only if city name (N401) is in the U.S. or Canada.
Notes:	Mailing Address Line 2 Text DEERS Length=40

Data Element Summary

Ref.	Data			
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>	
Must Use	N401	19	City Name	O AN 2/30
			Free-form text for city name	
			Required by DEERS.	
			Mailing Address City Name	
			DEERS Length=20	
Dep	N402	156	State or Province Code	O ID 2/2
			Code (Standard State/Province) as defined by appropriate government agency	
			Mailing Address US Postal Region State Code	
			DEERS Length=2	
Dep	N403	116	Postal Code	O ID 3/15
			Code defining international postal zone code excluding punctuation and blanks (zip code for United States)	
			(2-field concatenation)	
			Mailing Address US Postal Region ZIP Code	
			DEERS Length=5	
			Mailing Address US Postal Region ZIP Extension Code	
			DEERS Length=4	
Must Use	N404	26	Country Code	O ID 2/3
			Code identifying the country	
			Required by DEERS.	

Mailing Address Country Code
DEERS Length=2

Segment: **PER** Administrative Communications Contact

Position: 080

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 3

Purpose: To identify a person or office to whom administrative communications should be directed

Syntax Notes: 1 If either PER03 or PER04 is present, then the other is required.

2 If either PER05 or PER06 is present, then the other is required.

3 If either PER07 or PER08 is present, then the other is required.

Semantic Notes:

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	PER01	366	Contact Function Code	M ID 2/2
			Code identifying the major duty or responsibility of the person or group named	
			IC Information Contact	
Must Use	PER03	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			HP Home Phone Number	
			WP Work Phone Number	
Must Use	PER04	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	
			Home Telephone Number/Work Telephone Number	
			DDERS Length=14	
	PER05	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			HP Home Phone Number	
			WP Work Phone Number	
	PER06	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	

Home Telephone Number/Work Telephone Number
DEERS Length=14

Segment: **AAA** Request Validation (Optional)
Position: 085
Loop: 2100C Mandatory
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
			N No	
			Y Yes	
Must Use	AAA03	901	Reject Reason Code	M ID 2/2
			Code assigned by issuer to identify reason for rejection	
			15 Required application data missing	
			58 Invalid/Missing Date-of-Birth	
			64 Invalid/Missing Patient ID	
			65 Invalid/Missing Patient Name	
			68 Duplicate Patient ID Number	
			75 Subscriber/Insured Not Found	
			76 Duplicate Subscriber/Insured ID Number	
Must Use	AAA04	889	Follow-up Action Code	M ID 1/1
			Code identifying follow-up actions allowed	
			C Please Correct and Resubmit	

Segment: DMG Demographic Information**Position:** 100**Loop:** 2100C Mandatory**Level:** Detail**Usage:** Optional**Max Use:** 1**Purpose:** To supply demographic information**Syntax Notes:** 1 If either DMG01 or DMG02 is present, then the other is required.**Semantic Notes:** 1 DMG02 is the date of birth.

2 DMG07 is the country of citizenship.

3 DMG09 is the age in years.

Comments:**Data Element Summary**

	Ref.	Data	Name	Attributes
	Des.	Element		
Must Use	DMG01	1250	Date Time Period Format Qualifier	X ID 2/3
Code indicating the date format, time format, or date and time format				
Required by DEERS.				
D8 Date Expressed in Format CCYYMMDD				
Must Use	DMG02	1251	Date Time Period	X AN 1/35
Expression of a date, a time, or range of dates, times or dates and times				
Required by DEERS				
Person Birth Calendar Date				
DEERS Length=8				
Must Use	DMG03	1068	Gender Code	O ID 1/1
Code indicating the sex of the individual				
Required by DEERS.				
Person Sex Code				
DEERS Length=1				
F Female				
M Male				
U Unknown				

Segment: **INS** Insured Benefit

Position: 110

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To provide benefit information on insured entities

Syntax Notes: 1 If either INS11 or INS12 is present, then the other is required.

Semantic Notes:

- 1 INS01 indicates status of the insured. A "Y" value indicates the insured is a subscriber; an "N" value indicates the insured is a dependent.
- 2 INS10 is the handicapped status indicator. A "Y" value indicates an individual is handicapped; an "N" value indicates an individual is not handicapped.
- 3 INS12 is the date of death.
- 4 INS14, INS15, and INS16 identify where the employee works.
- 5 INS17 is the number assigned to each family member born with the same birth date. This number identifies birth sequence for multiple births allowing proper tracking and response of benefits for each dependent (i.e., twins, triplets, etc.).

Comments:

Data Element Summary

	Ref.	Data		
			<u>Element</u>	<u>Attributes</u>
M	INS01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response Y Yes	
M	INS02	1069	Individual Relationship Code	M ID 2/2
			Code indicating the relationship between two individuals or entities	
			Person Association Reason Code DEERS Length=2	
			18 Self	

Segment: **DTP** **Date or Time or Period**
Position: 120
Loop: 2100C Mandatory
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data			<u>Attributes</u>
			<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	DTP01	374		Date/Time Qualifier	M ID 3/3
				Code specifying type of date or time, or both date and time	
				442 Date of Death	
				Date life terminated	
M	DTP02	1250		Date Time Period Format Qualifier	M ID 2/3
				Code indicating the date format, time format, or date and time format	
				D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251		Date Time Period	M AN 1/35
				Expression of a date, a time, or range of dates, times or dates and times	
				Person Death Calendar Date	
				DEERS Length=8	

Segment:	EB Eligibility or Benefit Information (Personnel Data)
Position:	130
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.
Comments:	

Data Element Summary

Ref.	Data		Attributes
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	EB01	1390 Eligibility or Benefit Information	M ID 1/2
		Code identifying eligibility or benefit information	
		W Other Source of Data	

Segment:	LS Loop Header
Position:	330
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the next segment begins a loop
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the outer loop. When specified by the standard setting body as mandatory, this segment in combination with "LE", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LS and LE segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	LS01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	

Segment: **NM1** Individual or Organizational Name
Position: 340
Loop: 2120C Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

Ref.	Data			
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code Code identifying an organizational entity, a physical location, property or an individual 36 Employer	M ID 2/3
M	NM102	1065	Entity Type Qualifier Code qualifying the type of entity 2 Non-Person Entity	M ID 1/1
	NM108	66	Identification Code Qualifier Code designating the system/method of code structure used for Identification Code (67) FA Facility Identification	X ID 1/2
	NM109	67	Identification Code Code identifying a party or other code Required by DEERS (3 field concatenation) Service Branch Classification Code DEERS Length=1 Personnel Category Code DEERS Length=1 Unit Identification Code DEERS Length=8	X AN 2/80

Segment: **N4** Geographic Location
Position: 370
Loop: 2120C Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify the geographic place of the named party
Syntax Notes: 1 If N406 is present, then N405 is required.
Semantic Notes:
Comments: 1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location.
2 N402 is required only if city name (N401) is in the U.S. or Canada.

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
N403	116	Postal Code	O ID 3/15
		Code defining international postal zone code excluding punctuation and blanks (zip code for United States)	
		(2 field concatenation)	
		Unit Location US Postal Region ZIP Code	
		DEERS Length=5	
		Unit Location US Postal Region ZIP Extension Code	
		DEERS Length=4	
N404	26	Country Code	O ID 2/3
		Code identifying the country	
		Unit Location Country Code	
		DEERS Length=2	

Segment:	LE Loop Trailer
Position:	400
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the loop immediately preceding this segment is complete
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the other loop. When specified by the standards setting body as mandatory, this segment in combination with "LS", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop beginning segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LE and LS segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	
M	LE01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	

Segment:	EB Eligibility or Benefit Information (Health Care Coverage)
Position:	130
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.
Comments:	
Notes:	This EB Loop should be repeated equivalent to the number of Health Care Delivery Program Plan Coverage Codes a person may have been enrolled in during the date range of the Eligibility Inquiry.

Data Element Summary

Ref.	Data			Attributes
<u>Des.</u>	<u>Element</u>	<u>Name</u>		
M	EB01	1390	Eligibility or Benefit Information	M ID 1/2
			Code identifying eligibility or benefit information	
		1	Active Coverage	
Must Use	EB03	1365	Service Type Code	O ID 1/2
			Code identifying the classification of service	
			Required by DEERS.	
			D=Dental	
			M=Health Care	
			P=BRAC Pharmacy	
		1	Medical Care	
		35	Dental Care	
		88	Pharmacy	
	EB04	1336	Insurance Type Code	O ID 1/3
			Code identifying the type of insurance policy within a specific insurance program	
		C1	Commercial	
	EB05	1204	Plan Coverage Description	O AN 1/50

A description or number that identifies the plan or coverage

Required by DEERS/HIPAA.

(Refer to X12 Data dictionary for more comprehensive list)

Health Care Delivery Program Plan Coverage Code

DEERS Length=3

- 001 Direct Care for Active Duty Sponsors
- 002 Direct Care for Active Duty Family Members
- 003 TRICARE Standard for Active Duty Family Members
- 004 Direct Care of Survivors of Active Duty Deceased
- 005 TRICARE Standard for Survivors of Active Duty Deceased Sponsors
- 006 Direct Care for Transitional Assistance Family Members
- 007 TRICARE Standard for Transitional Assistance Sponsors and Family Members
- 008 Direct Care for Retired Sponsors and Family Members
- 009 TRICARE Standard for Retired Sponsors and Family Members
- 011 Direct Care CONUS DoD Affiliates
- 012 TRICARE Standard for CONUS DoD Affiliates
- 013 Direct Care for CONUS DoD Affiliates
- 101 CHAMPUS Reform Initiative (CRI)-CHAMPUS Prime (History)
- 102 Fort Still-Catchment Area Management (CAM) Program (History)
- 103 Fort-Carson Catchment Area Management (CAM) Program (History)
- 104 Bergstrom Air Force Base (AFB)-(CAM) Program (History)
- 105 Like/Williams Air Force Base (AFB)-(CAM) Program (History)
- 106 TRICARE Prime Individual Coverage Active Duty Sponsors
- 107 TRICARE Prime Individual Coverage for Active Duty Family Members
- 108 TRICARE Prime Family Coverage for Active Duty Family Members
- 109 TRICARE (USFHP) Individual Coverage for Active Duty Family Members
- 110 TRICARE (USFHP) Family Coverage for Active Duty Family Members
- 111 TRICARE Prime for Survivors of Active Duty Deceased Sponsors
- 112 TRICARE Prime Individual Coverage for Transitional Assistance Sponsors & Family Members
- 113 TRICARE Prime Family Coverage for Transitional Assistance Sponsors & Family Members
- 114 TRICARE (USFHP) individual Coverage for Transitional Assistance Sponsors & Family Members
- 115 TRICARE (USFHP) Family Coverage for Transitional Assistance Sponsors & Family Members
- 116 TRICARE Prime Individual Coverage for Retired Sponsors & Family Members
- 117 TRICARE Prime Family Coverage for Retired Sponsors & Family Members

118	TRICARE (USFHP) Individual Coverage for Retired Sponsors & Family Members
119	TRICARE (USFHP) Family Coverage for Retired Sponsors & Family Members
120	TRICARE Senior Prime Individual Coverage for Retired Sponsors & Family Members
121	Continued Health Care Benefits Program (CHCBP) Individual Coverage
122	Continued Health Care Benefits Program (CHCBP) Family Coverage
123	Federal Employees Health Benefits Program (FEHBP) Individual Coverage
124	Federal Employees Health Benefits Program (FEHBP) Family Std Coverage
125	Federal Employees Health Benefits Program (FEHBP) Individual High Coverage
126	Federal Employees Health Benefits Program (FEHBP) Family High Coverage
127	TRICARE Senior Supplement
301	BRAC Pharmacy
302	Mail Order Pharmacy

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			356 Eligibility Begin	
			Date on which eligibility begins	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Health Care Coverage Begin Calendar Date	
			DEERS Length=8	

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			357 Eligibility End	
			Date on which eligibility ends	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Health Care Coverage End Calendar Date	
			DEERS Length=8	

Segment: **AAA** Request Validation (Optional)
Position: 160
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	AAA01	1073	Yes/No Condition or Response Code Code indicating a Yes or No condition or response N No Y Yes	M ID 1/1
Must Use	AAA03	901	Reject Reason Code Code assigned by issuer to identify reason for rejection 15 Required application data missing 56 Inappropriate Date	O ID 2/2
Must Use	AAA04	889	Follow-up Action Code Code identifying follow-up actions allowed C Please Correct and Resubmit	O ID 1/1

Segment:	MSG Message Text
Position:	250
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	10
Purpose:	To provide a free-form format that allows the transmission of text information
Syntax Notes:	1 If MSG03 is present, then MSG02 is required.
Semantic Notes:	1 MSG03 is the number of lines to advance before printing.
Comments:	1 MSG02 is not related to the specific characteristics of a printer, but identifies top of page, advance a line, etc. 2 If MSG02 is "AA - Advance the specified number of lines before print" then MSG03 is required.
Notes:	The MSG segment will always accompany an AAA Segment when indicating an Eligibility Inquiry has been rejected. Used to further describe why a 270 Eligibility Inquiry was rejected.

Data Element Summary

Ref.	Data		
	<u>Des.</u>	<u>Element</u> <u>Name</u>	<u>Attributes</u>
M	MSG01	933 Free-Form Message Text	M AN 1/264
		Free-form message text	
		Required when AAA rejection segment is present.	
		This element is used to display and define the reason for rejection.	

Segment:	EB Eligibility or Benefit Information (Primary Care Manager)
Position:	130
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.

Comments:**Notes:**

This EB Loop should be repeated equivalent to the number of Primary Care Manager selections a person may have selected during the date range of the Eligibility Inquiry.

Within the Primary Care Manager (PCM) EB Loop limited information is returned for those physician whose network category is Direct Care or USFHP.

[The HCDP Program Type Code, Plan Coverage Code, Network Provide Type Code, DMIS ID and Region is returned for all types of PCM]

Data Element Summary

Ref.	Des.	Data		Attributes
		<u>Element</u>	<u>Name</u>	
M	EB01	1390	Eligibility or Benefit Information	M ID 1/2
			Code identifying eligibility or benefit information L Primary Care Provider	
Must Use	EB03	1365	Service Type Code	O ID 1/2
			Code identifying the classification of service Required by DEERS. M=Health Care (TRICARE, etc.) Health Care Delivery Program Type Code DEERS Length=1 1 Medical Care	
	EB05	1204	Plan Coverage Description	O AN 1/50
			A description or number that identifies the plan or coverage	

Required by DEERS/HIPAA.

(Refer to X12 Data dictionary for more comprehensive list)

Health Care Delivery Program Plan Coverage Code

DEERS Length=3

- 001 Direct Care for Active Duty Sponsors
- 002 Direct Care for Active Duty Family Members
- 003 TRICARE Standard for Active Duty Family Members
- 004 Direct Care of Survivors of Active Duty Deceased
- 005 TRICARE Standard for Survivors of Active Duty Deceased Sponsors
- 006 Direct Care for Transitional Assistance Family Members
- 007 TRICARE Standard for Transitional Assistance Sponsors and Family Members
- 008 Direct Care for Retired Sponsors and Family Members
- 009 TRICARE Standard for Retired Sponsors and Family Members
- 011 Direct Care CONUS DoD Affiliates
- 012 TRICARE Standard for CONUS DoD Affiliates
- 013 Direct Care for CONUS DoD Affiliates
- 101 CHAMPUS Reform Initiative (CRI)-CHAMPUS Prime (History)
- 102 Fort Still-Catchment Area Management (CAM) Program (History)
- 103 Fort-Carson Catchment Area Management (CAM) Program (History)
- 104 Bergstrom Air Force Base (AFB)-(CAM) Program (History)
- 105 Like/Williams Air Force Base (AFB)-(CAM) Program (History)
- 106 TRICARE Prime Individual Coverage Active Duty Sponsors
- 107 TRICARE Prime Individual Coverage for Active Duty Family Members
- 108 TRICARE Prime Family Coverage for Active Duty Family Members
- 109 TRICARE (USFHP) Individual Coverage for Active Duty Family Members
- 110 TRICARE (USFHP) Family Coverage for Active Duty Family Members
- 111 TRICARE Prime for Survivors of Active Duty Deceased Sponsors
- 112 TRICARE Prime Individual Coverage for Transitional Assistance Sponsors & Family Members
- 113 TRICARE Prime Family Coverage for Transitional Assistance Sponsors & Family Members
- 114 TRICARE (USFHP) individual Coverage for Transitional Assistance Sponsors & Family Members
- 115 TRICARE (USFHP) Family Coverage for Transitional Assistance Sponsors & Family Members
- 116 TRICARE Prime Individual Coverage for Retired Sponsors & Family Members
- 117 TRICARE Prime Family Coverage for Retired Sponsors & Family Members
- 118 TRICARE (USFHP) Individual Coverage for Retired Sponsors & Family Members

**EB12 1073 Yes/No Condition or Response Code- Industry: In Plan O ID 1/1
Network Indicator**

Code indicating a Yes or No condition or response

Required by DEERS

Y=Direct Care Network

N=Civilian

U=None

N	No
U	Unknown
Y	Yes

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			193 Period Start	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Primary Care Manager Selection Begin Calendar Date	
			DEERS Length=8	

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			194 Period End	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Primary Care Manager Selection End Calendar Date	
			DEERS Length=8	

Segment:	LS Loop Header
Position:	330
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the next segment begins a loop
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the outer loop. When specified by the standard setting body as mandatory, this segment in combination with "LE", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LS and LE segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	LS01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	

Segment: **NM1** Individual or Organizational Name (Entity-Primary Care Manager)
Position: 340
Loop: 2120C Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
 2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

Ref.	Data			
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			P3 Primary Care Provider	
			Physician that is selected by the insured to provide medical care	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			1 Person	
Dep	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Primary Care Manager Name	
			DEERS Length=40	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS.	
			Primary Care Manager Identifier Type Code	
			DEERS Length=1	
			SV Service Provider Number	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS.	
			Primary Care Manager Identifier	
			DEERS Length=18	



Segment:	N4 Geographic Location
Position:	370
Loop:	2120C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To specify the geographic place of the named party
Syntax Notes:	1 If N406 is present, then N405 is required.
Semantic Notes:	
Comments:	1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location. 2 N402 is required only if city name (N401) is in the U.S. or Canada.

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
N403	116	Postal Code	O ID 3/15
		Code defining international postal zone code excluding punctuation and blanks (zip code for United States)	
		Required by DEERS. (2 field concatenation)	
		Primary Care Manager Mailing Address US Postal Region ZIP Code DEERS length=5	
		Primary Care Manager Mailing Address US Post Region ZIP Extension DEERS Length=4	
N404	26	Country Code	O ID 2/3
		Code identifying the country	
		Required by DEERS.	
		Primary Care Manager Mailing Address Country Code DEERS Length=2	
Must Use	N405	309 Location Qualifier	X ID 1/2
		Code identifying type of location	
		Required by DEERS.	
		RJ Region	
Must Use	N406	310 Location Identifier	O AN 1/30
		Code which identifies a specific location	
		Required by DEERS.	

(2 field concatenation)

Primary Care Manager Region Code

DEERS Length=2

Primary Care Manger Enrolling Division DMIS Identifier

DEERS Length=1

Segment: **PER** Administrative Communications Contact

Position: 380

Loop: 2120C Optional

Level: Detail

Usage: Optional

Max Use: 3

Purpose: To identify a person or office to whom administrative communications should be directed

Syntax Notes: 1 If either PER03 or PER04 is present, then the other is required.

2 If either PER05 or PER06 is present, then the other is required.

3 If either PER07 or PER08 is present, then the other is required.

Semantic Notes:

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	PER01	366	Contact Function Code	M ID 2/2
			Code identifying the major duty or responsibility of the person or group named	
			IC Information Contact	
Must Use	PER03	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			TE Telephone	
Must Use	PER04	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	
			Primary Care Manager Telephone Number	
			DEERS Length=14	

Segment:	LE Loop Trailer
Position:	400
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the loop immediately preceding this segment is complete
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the other loop. When specified by the standards setting body as mandatory, this segment in combination with "LS", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop beginning segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LE and LS segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	LE01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	

Segment:	EB Eligibility or Benefit Information (Other Government Program)
Position:	130
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.
Comments:	

Data Element Summary

Ref.	Data			
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>	
M	EB01	1390 Eligibility or Benefit Information	M	ID 1/2
		Code identifying eligibility or benefit information		
		R Other or Additional Payor		
Dep	EB04	1336 Insurance Type Code	O	ID 1/3
		Code identifying the type of insurance policy within a specific insurance program		
		Other Government Program Type Code		
		DEERS Length=1		
		MA Medicare Part A		
		(Other Government Program)		
		MB Medicare Part B		
		(Other Government Program)		
		OT Other		
		(CHAMPVA-Other Government Program)		

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	DTP01	374	Date/Time Qualifier Code specifying type of date or time, or both date and time 193 Period Start	M ID 3/3
M	DTP02	1250	Date Time Period Format Qualifier Code indicating the date format, time format, or date and time format D8 Date Expressed in Format CCYYMMDD	M ID 2/3
M	DTP03	1251	Date Time Period Expression of a date, a time, or range of dates, times or dates and times Other Government Program Effective Calendar Date DEERS Length=8	M AN 1/35

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	DTP01	374	Date/Time Qualifier Code specifying type of date or time, or both date and time 194 Period End	M ID 3/3
M	DTP02	1250	Date Time Period Format Qualifier Code indicating the date format, time format, or date and time format D8 Date Expressed in Format CCYYMMDD	M ID 2/3
M	DTP03	1251	Date Time Period Expression of a date, a time, or range of dates, times or dates and times Other Government Program Expiration Calendar Date DEERS Length=8	M AN 1/35

Segment: **HL** Hierarchical Level (Dependent)

Position: 010

Loop: 2000D Optional(Must Use)

Level: Detail

Usage: Optional (Must Use)

Max Use: 1

Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		
	Des.	Element	Name	Attributes
M	HL01	628	Hierarchical ID Number A unique number assigned by the sender to identify a particular data segment in a hierarchical structure 4 Incremental	M AN 1/12
Must Use	HL02	734	Hierarchical Parent ID Number Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to 3 Identifies the Hierarchical level to which this level is subordinate	O AN 1/12
M	HL03	735	Hierarchical Level Code Code defining the characteristic of a level in a hierarchical structure 23 Dependent Identifies the individual who is affiliated with the subscriber, such as spouse, child, etc., and therefore may	M ID 1/2

		be entitled to benefits			
Must Use	HL04	736	Hierarchical Child Code	O	ID 1/1
		Code indicating if there are hierarchical child data segments subordinate to the level being described			
		Required by DEERS/HIPAA.			
		0	No Subordinate HL Segment in This Hierarchical Structure.		

Segment: **TRN** Trace (Optional)

Position: 020

Loop: 2000D Optional

Level: Detail

Usage: Optional

Max Use: 3

Purpose: To uniquely identify a transaction to an application

Syntax Notes:

Semantic Notes:

- 1 TRN02 provides unique identification for the transaction.
- 2 TRN03 identifies an organization.
- 3 TRN04 identifies a further subdivision within the organization.

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	TRN01	481	Trace Type Code Code identifying which transaction is being referenced 2 Referenced Transaction Trace Numbers	M ID 1/2
M	TRN02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Reserved for discussion. Submitter Transaction Number [Trace Number <or> (ISA, GS, ST Control Numbers)] Electronic Data Interchange Message Control Number DEERS Length=20	M AN 1/30
Must Use	TRN03	509	Originating Company Identifier A unique identifier designating the company initiating the funds transfer instructions. The first character is one-digit ANSI identification code designation (ICD) followed by the nine-digit identification number which may be an IRS employer identification number (EIN), data universal numbering system (DUNS), or a user assigned number; the ICD for an EIN is 1, DUNS is 3, user assigned number is 9 Reserved for discussion	O AN 10/10
Dep	TRN04	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Reserved for discussion	O AN 1/30

Segment: **NM1** Individual or Organizational Name (Dependent)
Position: 030
Loop: 2100D Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code Code identifying an organizational entity, a physical location, property or an individual 03 Dependent	M ID 2/3
M	NM102	1065	Entity Type Qualifier Code qualifying the type of entity 1 Person	M ID 1/1
Must Use	NM103	1035	Name Last or Organization Name Individual last name or organizational name Required by DEERS. Person Last Name DEERS Length=26	O AN 1/35
Must Use	NM104	1036	Name First Individual first name Required by DEERS Person First Name DEERS Length=20	O AN 1/25
Dep	NM105	1037	Name Middle Individual middle name or initial Person Middle Name DEERS Length=20	O AN 1/25
Dep	NM107	1039	Name Suffix Suffix to individual name Person Cadency Name	O AN 1/10

			DEERS Length=4	
Must Use	NM108	66	Identification Code Qualifier Code designating the system/method of code structure used for Identification Code (67) Required by DEERS.	X ID 1/2
			MI Member Identification Number	
Must Use	NM109	67	Identification Code Code identifying a party or other code Required by DEERS (2 fields concatenation) P=Patient ID Person Identifier Type Code DEERS Length=1 Patient Identifier DEERS Length=10	X AN 2/80

Segment:	REF Reference Identification
Position:	040
Loop:	2100D Optional
Level:	Detail
Usage:	Optional
Max Use:	9
Purpose:	To specify identifying information
Syntax Notes:	<ol style="list-style-type: none"> 1 At least one of REF02 or REF03 is required. 2 If either C04003 or C04004 is present, then the other is required. 3 If either C04005 or C04006 is present, then the other is required.
Semantic Notes:	1 REF04 contains data relating to the value cited in REF02.
Comments:	

Data Element Summary

	<u>Ref.</u> <u>Des.</u>	<u>Data</u> <u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier Code qualifying the Reference Identification HJ Identity Card Number Number assigned to an individual by a government SY Social Security Number	M ID 2/3
Must Use	REF02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Required by DEERS/HIPAA. (2 field concatenation) when using HJ qualifier in the REF01 D or T=Temporary ID F=Foreign Identification <or> Social Security Number Person Identifier Type Code DEERS Length=1 Person Identifier DEERS Length=11	X AN 1/30

Segment: **N3** Address Information
Position: 060
Loop: 2100D Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify the location of the named party
Syntax Notes:
Semantic Notes:
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	N301	166	Address Information	M AN 1/55
			Address information	
			Mailing Address Line 1 Text	
			DEERS Length=40	
Dep	N302	166	Address Information	O AN 1/55
			Address information	
			Mailing Address Line 2 Text	
			DEERS Length=40	

Segment: **N4** Geographic Location
Position: 070
Loop: 2100D Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify the geographic place of the named party
Syntax Notes: 1 If N406 is present, then N405 is required.
Semantic Notes:
Comments: 1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location.
2 N402 is required only if city name (N401) is in the U.S. or Canada.

Data Element Summary

	Ref.	Data	Attributes
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
Must Use	N401	19 City Name Free-form text for city name Required by DEERS. Mailing Address City Name DEERS Length=20	O AN 2/30
Dep	N402	156 State or Province Code Code (Standard State/Province) as defined by appropriate government agency Mailing Address US Postal Region State Code DEERS Length=2	O ID 2/2
Dep	N403	116 Postal Code Code defining international postal zone code excluding punctuation and blanks (zip code for United States) (2 field concatenation) Mailing Address US Postal Region ZIP Code DEERS Length=5 Mailing Address US Postal Region ZIP Extension Code DEERS Length=4	O ID 3/15
Must Use	N404	26 Country Code Code identifying the country Required by DEERS. Mailing Address Country Code DEERS Length=2	O ID 2/3

Segment: **PER** Administrative Communications Contact

Position: 080

Loop: 2100D Optional

Level: Detail

Usage: Optional

Max Use: 3

Purpose: To identify a person or office to whom administrative communications should be directed

Syntax Notes: 1 If either PER03 or PER04 is present, then the other is required.

2 If either PER05 or PER06 is present, then the other is required.

3 If either PER07 or PER08 is present, then the other is required.

Semantic Notes:

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	PER01	366	Contact Function Code	M ID 2/2
			Code identifying the major duty or responsibility of the person or group named	
			IC Information Contact	
Must Use	PER03	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			HP Home Phone Number	
			WP Work Phone Number	
Must Use	PER04	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	
			Home Telephone Number Code/ Work Telephone Number Code	
			DEERS Length=14	
	PER05	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			HP Home Phone Number	
			WP Work Phone Number	
	PER06	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	

Home Telephone Number Code/ Work Telephone Number Code
DEERS Length=14

Segment: **AAA** Request Validation (Optional)
Position: 085
Loop: 2100D Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	AAA01	1073	Yes/No Condition or Response Code Code indicating a Yes or No condition or response N No Y Yes	M ID 1/1
Must Use	AAA03	901	Reject Reason Code Code assigned by issuer to identify reason for rejection 15 Required application data missing 56 Inappropriate Date 64 Invalid/Missing Patient ID 67 Patient Not Found	M ID 2/2
Must Use	AAA04	889	Follow-up Action Code Code identifying follow-up actions allowed C Please Correct and Resubmit	M ID 1/1

Segment: DMG Demographic Information**Position:** 100**Loop:** 2100D Optional**Level:** Detail**Usage:** Optional**Max Use:** 1**Purpose:** To supply demographic information**Syntax Notes:** 1 If either DMG01 or DMG02 is present, then the other is required.**Semantic Notes:** 1 DMG02 is the date of birth.

2 DMG07 is the country of citizenship.

3 DMG09 is the age in years.

Comments:**Data Element Summary**

	Ref.	Data	Name	Attributes
	Des.	Element		
Must Use	DMG01	1250	Date Time Period Format Qualifier	X ID 2/3
Code indicating the date format, time format, or date and time format Required by DEERS.				
D8 Date Expressed in Format CCYYMMDD				
Must Use	DMG02	1251	Date Time Period	X AN 1/35
Expression of a date, a time, or range of dates, times or dates and times Required by DEERS.				
Person Birth Calendar Date DEERS Length=8				
Must Use	DMG03	1068	Gender Code	O ID 1/1
Code indicating the sex of the individual Required by DEERS.				
Person Sex Code DEERS Length=1				
F Female				
M Male				
U Unknown				

Segment: **INS** Insured Benefit

Position: 110

Loop: 2100D Optional

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To provide benefit information on insured entities

Syntax Notes: 1 If either INS11 or INS12 is present, then the other is required.

Semantic Notes:

- 1 INS01 indicates status of the insured. A "Y" value indicates the insured is a subscriber; an "N" value indicates the insured is a dependent.
- 2 INS10 is the handicapped status indicator. A "Y" value indicates an individual is handicapped; an "N" value indicates an individual is not handicapped.
- 3 INS12 is the date of death.
- 4 INS14, INS15, and INS16 identify where the employee works.
- 5 INS17 is the number assigned to each family member born with the same birth date. This number identifies birth sequence for multiple births allowing proper tracking and response of benefits for each dependent (i.e., twins, triplets, etc.).

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	INS01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
			N No	
M	INS02	1069	Individual Relationship Code	M ID 2/2
			Code indicating the relationship between two individuals or entities	
			Person Association Reason Code	
			DEERS Length=2	
			01 Spouse	
			19 Child	
			Dependent between the ages of 0 and 19; age qualifications may vary depending on policy	
			21 Unknown	
			34 Other Adult	

Segment:	EB Eligibility or Benefit Information (Health Care Coverage)
Position:	130
Loop:	2110D Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.
Comments:	
Notes:	This EB Loop should repeat equivalent to the number of Health Care Delivery Program Plan Coverage Codes a person may have been enrolled in during the date range of the Eligibility Inquiry.

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	EB01	1390 Eligibility or Benefit Information	M ID 1/2
		Code identifying eligibility or benefit information	
		1 Active Coverage	
	EB03	1365 Service Type Code	O ID 1/2
		Code identifying the classification of service	
		Required by DEERS.	
		Health Care Delivery Program Type Code	
		M=Health Care (TRICARE, etc)	
		D=Dental	
		P=Pharmacy	
		Health Care Delivery Program Type Code	
		DEERS Length =1	
		1 Medical Care	
		35 Dental Care	
		88 Pharmacy	
	EB04	1336 Insurance Type Code	O ID 1/3

Code identifying the type of insurance policy within a specific insurance program

C1 Commercial

EB05 1204 Plan Coverage Description O AN 1/50

A description or number that identifies the plan or coverage

Required by DEERS/HIPAA.

(Refer to X12 Data dictionary for more comprehensive list)

Health Care Delivery Program Plan Coverage Code

DEERS Length=3

001	Direct Care for Active Duty Sponsors
002	Direct Care for Active Duty Family Members
003	TRICARE Standard for Active Duty Family Members
004	Direct care of Survivors of Active Duty Deceased
005	TRICARE Standard for Survivors of Active Duty Deceased Sponsors
006	Direct Care for Transitional Assistance Family Members
007	TRICARE Standard for Transitional Sponsors and Family Members
008	Direct Care for Retired Sponsors and Family Members
009	TRICARE Standard for Retired Sponsors and Family Members
011	Direct Care of CONUS DoD Affiliates
012	TRICARE Standard for CONUS DoD Affiliates
013	Direct Care for CONUS DoD Affiliates
101	CHAMPUS Reform Initiative (CRI)-CHAMPUS Prime (History)
102	Fort-Still Catchment Area Management (CAM) Program (History)
103	Fort-Carson Catchment Area Management (CAM) Program (History)
104	Bergstrom Air Force Base (AFB)-Catchment Area Management (CAM) Program (History)
105	Like/Williams Air Force Base (AFB)-Catchment Area Management (CAM) Program (History)
106	TRICARE Prime Individual Coverage Active Duty Sponsors
107	TRICARE Prime Individual Coverage for Active Duty Family Members
108	TRICARE Prime Family Coverage for Active Duty Family Members
109	TRICARE (USFHP) Individual Coverage for Active Duty Family Members
110	TRICARE (USFHP) Family Coverage for Active Duty Family Members

111	TRICARE Prime for Survivors of Active Duty Deceased Sponsors
112	TRICARE Prime Individual Coverage for Transitional Assistance Sponsors and Family Members
113	TRICARE Prime Family Coverage for Transitional Assistance Sponsors and Family Members
114	TRICARE (USFHP) Individual Coverage for Transitional Assistance Sponsors and Family Members
115	TRICARE (USFHP) Family Coverage for Transitional Assistance Sponsors and Family Members
116	TRICARE Prime Individual Coverage for Retired Sponsors and Family Members
117	TRICARE Prime Family Coverage for Retired Sponsors and Family Members
118	TRICARE (USFHP) Individual Coverage for Retired Sponsors and Family Members
119	TRICARE (USFHP) Family Coverage for Retired Sponsors and Family Members
120	TRICARE Senior Prime Individual Coverage for Retired Sponsors and Family Members
121	Continued Health Care Benefits Program (CHCBP) Individual Coverage
122	Continued Health Care Benefit Program (CHCBP) Family Coverage
123	Federal Employees Health Benefits Program (FEHBP) Individual Coverage
124	Federal Employees Health Benefit Program (FEHBP) Family Standard Coverage
125	Federal Employees Health Benefit Program (FEHBP) Individual High Coverage
126	Federal Employees Health Benefit Program (FEHBP) Family High Coverage
127	TRICARE Senior Supplement
301	BRAC Pharmacy
302	Mail Order Pharmacy

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
		356	Eligibility Begin	
			Date on which eligibility begins	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
		D8	Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Health Care Coverage Begin Calendar Date	
			DEERS Length=8	

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data			Attributes
		<u>Des.</u>	<u>Element</u>	<u>Name</u>	
M	DTP01	374	Date/Time Qualifier		M ID 3/3
				Code specifying type of date or time, or both date and time	
				357 Eligibility End	
				Date on which eligibility ends	
M	DTP02	1250	Date Time Period Format Qualifier		M ID 2/3
				Code indicating the date format, time format, or date and time format	
				D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period		M AN 1/35
				Expression of a date, a time, or range of dates, times or dates and times	
				Health Care Coverage End Calendar Date	
				DEERS Length=8	

Segment: **AAA** Request Validation
Position: 160
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	AAA01	1073	Yes/No Condition or Response Code Code indicating a Yes or No condition or response N No Y Yes	M ID 1/1
Must Use	AAA03	901	Reject Reason Code Code assigned by issuer to identify reason for rejection 15 Required application data missing 56 Inappropriate Date	O ID 2/2
Must Use	AAA04	889	Follow-up Action Code Code identifying follow-up actions allowed C Please Correct and Resubmit	O ID 1/1

Segment:	MSG Message Text
Position:	250
Loop:	2110D Optional
Level:	Detail
Usage:	Optional
Max Use:	10
Purpose:	To provide a free-form format that allows the transmission of text information
Syntax Notes:	1 If MSG03 is present, then MSG02 is required.
Semantic Notes:	1 MSG03 is the number of lines to advance before printing.
Comments:	1 MSG02 is not related to the specific characteristics of a printer, but identifies top of page, advance a line, etc. 2 If MSG02 is "AA - Advance the specified number of lines before print" then MSG03 is required.
Notes:	The MSG segment will always accompany the AAA Segments when indicating an Eligibility Inquiry has been rejected. Used to further describe why a 270 Eligibility Inquiry was rejected.

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	MSG01	933 Free-Form Message Text	M AN 1/264

Free-form message text

Required when AAA rejection segment is present.

This element is used to display and define the reason for rejection.

Segment:	EB Eligibility or Benefit Information (Primary Care Manager)
Position:	130
Loop:	2110D Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.

Comments:**Notes:**

This EB Loop should be repeated equivalent to the number of Primary Care Manager selections a person may have selected during the date range of the Eligibility Inquiry.

Within the Primary Care Manager (PCM) EB Loop limited information is returned for those physician whose network category is Direct Care or USFHP.

[The HCDP Program Type Code, Plan Coverage Code, Network Provide Type Code, DMIS ID and Region is returned for all types of PCM]

Data Element Summary

Ref.	Data			
		<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	EB01	1390	Eligibility or Benefit Information	M ID 1/2
			Code identifying eligibility or benefit information L Primary Care Provider	
Must Use	EB03	1365	Service Type Code	O ID 1/2
			Code identifying the classification of service Required by DEERS. M=Health Care (TRICARE, etc) Health Care Delivery Program Type Code DEERS Length =1 1 Medical Care	
	EB05	1204	Plan Coverage Description	O AN 1/50
			A description or number that identifies the plan or coverage	

Required by DEERS/HIPAA.

(Refer to X12 Data dictionary for more comprehensive list)

Health Care Delivery Program Plan Coverage Code

DEERS Length=3

- 001 Direct Care for Active Duty Sponsors
- 002 Direct Care for Active Duty Family Members
- 003 TRICARE Standard for Active Duty Family Members
- 004 Direct Care of Survivors of Active Duty Deceased
- 005 TRICARE Standard for Survivors of Active Duty Deceased Sponsors
- 006 Direct Care for Transitional Assistance Family Members
- 007 TRICARE Standard for Transitional Assistance Sponsors and Family Members
- 008 Direct Care for Retired Sponsors and Family Members
- 009 TRICARE Standard for Retired Sponsors and Family Members
- 011 Direct Care CONUS DoD Affiliates
- 012 TRICARE Standard for CONUS DoD Affiliates
- 013 Direct Care for CONUS DoD Affiliates
- 101 CHAMPUS Reform Initiative (CRI)-CHAMPUS Prime (History)
- 102 Fort Still-Catchment Area Management (CAM) Program (History)
- 103 Fort-Carson Catchment Area Management (CAM) Program (History)
- 104 Bergstrom Air Force Base (AFB)-(CAM) Program (History)
- 105 Like/Williams Air Force Base (AFB)-(CAM) Program (History)
- 106 TRICARE Prime Individual Coverage Active Duty Sponsors
- 107 TRICARE Prime Individual Coverage for Active Duty Family Members
- 108 TRICARE Prime Family Coverage for Active Duty Family Members
- 109 TRICARE (USFHP) Individual Coverage for Active Duty Family Members
- 110 TRICARE (USFPH) Family Coverage for Active Duty Family Members
- 111 TRICARE Prime for Survivors of Active Duty Deceased Sponsors
- 112 TRICARE Prime Individual Coverage for Transitional Assistance Sponsors & Family Members
- 113 TRICARE Prime Family Coverage for Transitional Assistance Sponsors & Family Members
- 114 TRICARE (USFHP) individual Coverage for Transitional Assistance Sponsors & Family Members
- 115 TRICARE (USFHP) Family Coverage for Transitional Assistance Sponsors & Family Members
- 116 TRICARE Prime Individual Coverage for Retired Sponsors & Family Members
- 117 TRICARE Prime Family Coverage for Retired Sponsors & Family Members
- 118 TRICARE (USFHP) Individual Coverage for Retired Sponsors & Family

	Members
119	TRICARE (USFHP) Family Coverage for Retired Sponsors & Family Members
120	TRICARE Senior Prime Individual Coverage for Retired Sponsors & Family Members
121	Continued Health Care Benefits Program (CHCBP) Individual Coverage
122	Continued Health Care Benefits Program (CHCBP) Family Coverage
123	Federal Employees Health Benefits Program (FEHBP) Individual Coverage
124	Federal Employees Health Benefits Program (FEHBP) Family Std Coverage
125	Federal Employees Health Benefits Program (FEHBP) Individual High Coverage
126	Federal Employees Health Benefits Program (FEHBP) Family High Coverage
127	TRICARE Senior Supplement
301	BRAC Pharmacy
302	Mail Order Pharmacy

**EB12 1073 Yes/No Condition or Response Code -Industry: In Plan O ID 1/1
Network Indicator**

Code indicating a Yes or No condition or response

Required by DEERS

Y=Direct Care Network

N=Civilian

U=None

Primary Care Manger Network Provider Type Code

DEERS Length=1

N	No
U	Unknown
Y	Yes

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			194 Period End	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Primary Care Manager Selection End Calendar Date	
			DEERS Length=8	

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			194 Period End	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Primary Care Manager Selection End Calendar Date	
			DEERS Length=8	

Segment:	LS Loop Header
Position:	330
Loop:	2110D Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the next segment begins a loop
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the outer loop. When specified by the standard setting body as mandatory, this segment in combination with "LE", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LS and LE segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	LS01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	

Segment: **NM1** Individual or Organizational Name (Entity-Primary Care Manager)
Position: 340
Loop: 2120D Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
 2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			P3 Primary Care Provider	
			Physician that is selected by the insured to provide medical care	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			1 Person	
Dep	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Primary Care Manager Name	
			DEERS Length=40	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS.	
			Primary Care Manager Identification Type Code	
			DEERS Length=1	
			SV Service Provider Number	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS.	

Primary Care Manager Identifier

DEERS Length=18

Segment:	N4 Geographic Location
Position:	370
Loop:	2120D Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To specify the geographic place of the named party
Syntax Notes:	1 If N406 is present, then N405 is required.
Semantic Notes:	
Comments:	1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location. 2 N402 is required only if city name (N401) is in the U.S. or Canada.

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
N403	116	Postal Code	O ID 3/15
		Code defining international postal zone code excluding punctuation and blanks (zip code for United States)	
		(2 field concatenation)	
		Primary Care Manager Mailing Address US Postal Region ZIP Code	
		DEERS Length=5	
		Primary Care Manager Mailing Address US Postal Region ZIP Extension Code	
		DEERS Length=4	
N404	26	Country Code	O ID 2/3
		Code identifying the country	
		Primary Care Manager Mailing Address Country Code	
		DEERS Length=2	
Must Use	N405	309 Location Qualifier	X ID 1/2
		Code identifying type of location	
		Required by DEERS.	
		RJ Region	
Must Use	N406	310 Location Identifier	O AN 1/30
		Code which identifies a specific location	
		Required by DEERS.	
		(2 field concatenation)	
		Primary Care Manager Region Identifier.	
		DEERS Length=2	

Primary Care Manage Enrolling Division DMIS Identifier
DEERS Length=4

Segment: **PER** Administrative Communications Contact

Position: 380

Loop: 2120D Optional

Level: Detail

Usage: Optional

Max Use: 3

Purpose: To identify a person or office to whom administrative communications should be directed

Syntax Notes: 1 If either PER03 or PER04 is present, then the other is required.

2 If either PER05 or PER06 is present, then the other is required.

3 If either PER07 or PER08 is present, then the other is required.

Semantic Notes:

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	PER01	366	Contact Function Code	M ID 2/2
			Code identifying the major duty or responsibility of the person or group named	
			IC Information Contact	
Must Use	PER03	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			TE Telephone	
Must Use	PER04	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	
			Primary Care Manger Telephone Number Code	
			DEERS Length=14	

Segment:	LE Loop Trailer
Position:	400
Loop:	2110D Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the loop immediately preceding this segment is complete
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the other loop. When specified by the standards setting body as mandatory, this segment in combination with "LS", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop beginning segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LE and LS segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	LE01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	

Segment:	EB Eligibility or Benefit Information (Other Government Program)
Position:	130
Loop:	2110D Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.

Comments:**Data Element Summary**

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	EB01	1390 Eligibility or Benefit Information	M ID 1/2
		Code identifying eligibility or benefit information	
		R Other or Additional Payor	
	EB04	1336 Insurance Type Code	O ID 1/3
		Code identifying the type of insurance policy within a specific insurance program	
		Other Government Program Type Code	
		DEERS Length=1	
		MA Medicare Part A	
		(Other Government Program)	
		MB Medicare Part B	
		Other Government Program	
		OT Other	
		(CHAMPVA-Other Government Program)	

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			193 Period Start	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Other Government Program Effective Date	
			DEERS Length =8	

Segment: **DTP** **Date or Time or Period**
Position: 150
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 20
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data			Attributes
		<u>Des.</u>	<u>Element</u>	<u>Name</u>	
M	DTP01		374	Date/Time Qualifier	M ID 3/3
				Code specifying type of date or time, or both date and time	
				194 Period End	
M	DTP02		1250	Date Time Period Format Qualifier	M ID 2/3
				Code indicating the date format, time format, or date and time format	
				D8 Date Expressed in Format CCYYMMDD	
M	DTP03		1251	Date Time Period	M AN 1/35
				Expression of a date, a time, or range of dates, times or dates and times	
				Other Government Program Expiration Calendar Date	
				DEERS Length=8	

Segment: **SE** Transaction Set Trailer
Position: 410
Loop:
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments)
Syntax Notes:
Semantic Notes:
Comments: 1 SE is the last segment of each transaction set.

Data Element Summary

	Ref.	Data		<u>Attributes</u>
		<u>Des.</u>	<u>Element Name</u>	
M	SE01	96	Number of Included Segments Total number of segments included in a transaction set including ST and SE segments	M N0 1/10
M	SE02	329	Transaction Set Control Number Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	M AN 4/9

2.2. 271 Partial Match Response

Functional Group ID=**HB**

Introduction:

This Draft Standard for Trial Use contains the format and establishes the data contents of the Eligibility, Coverage or Benefit Information Transaction Set (271) for use within the context of an Electronic Data Interchange (EDI) environment. This transaction set can be used to communicate information about or changes to eligibility, coverage or benefits from information sources (such as - insurers, sponsors, payors) to information receivers (such as - physicians, hospitals, repair facilities, third party administrators, governmental agencies). This information includes but is not limited to: benefit status, explanation of benefits, coverages, dependent coverage level, effective dates, amounts for co-insurance, co-pays, deductibles, exclusions and limitations.

Notes:

This transaction set was developed using the 4010 version of X12 and the 4010X092 HIPAA Implementation Guide. [EDISIM-271PARMA]

Heading:

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	Pos. No.	Seg. ID	Name	Req. Des.	Max.Use	Loop Repeat	Notes and Comments
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
			LOOP ID - 2100A			1	
M	030	NM1	Individual or Organizational Name (Source)	M	1		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
M	030	NM1	Individual or Organizational Name (Receiver)	M	1		
			LOOP ID - 2000C			>1	
M	010	HL	Hierarchical Level (Subscriber)	M	1		
	020	TRN	Trace	O	1		n1

			LOOP ID - 2100C			>1	
M	030	NM1	Individual or Organizational Name (Subscriber)	M	1		
	040	REF	Reference Identification	O	9		
	040	REF	Reference Identification	O	9		
	060	N3	Address Information	O	1		
	070	N4	Geographic Location	O	1		
	080	PER	Administrative Communications Contact	O	3		
	100	DMG	Demographic Information	O	1		
	110	INS	Insured Benefit	O	1		
	120	DTP	Date or Time or Period	O	9		
			LOOP ID - 2110C			>1	
	130	EB	Eligibility or Benefit Information (Personnel)	O	1		
	330	LS	Loop Header	O	1		
			LOOP ID - 2120C			1	
	340	NM1	Individual or Organizational Name (Unit)	O	1		
	370	N4	Geographic Location	O	1		
	400	LE	Loop Trailer	O	1		
			LOOP ID - 2000D			>1	
	010	HL	Hierarchical Level (Dependent)	O	1		
	020	TRN	Trace (Optional)	O	3	n2	
			LOOP ID - 2100D			>1	
M	030	NM1	Individual or Organizational Name (Dependent)	M	1		
	040	REF	Reference Identification	O	9		
	060	N3	Address Information	O	1		
	070	N4	Geographic Location	O	1		
	080	PER	Administrative Communications Contact	O	3		
	100	DMG	Demographic Information	O	1		
	110	INS	Insured Benefit	O	1		
	120	DTP	Date or Time or Period	O	9		
M	410	SE	Transaction Set Trailer	M	1		

Transaction Set Notes

1. If the Eligibility, Coverage or Benefit Inquiry Transaction Set (270) includes a TRN segment, then the Eligibility, Coverage or Benefit Information Transaction Set (271) must return the trace number identified in the TRN segment.
2. If the Eligibility, Coverage or Benefit Inquiry Transaction Set (270) includes a TRN segment, then the Eligibility, Coverage or Benefit Information Transaction Set (271) must return the trace number identified in the TRN segment.

Segment: **ST** Transaction Set Header
Position: 010
Loop:
Level: Heading
Usage: Mandatory
Max Use: 1
Purpose: To indicate the start of a transaction set and to assign a control number
Syntax Notes:
Semantic Notes: 1 The transaction set identifier (ST01) is used by the translation routines of the interchange partners to select the appropriate transaction set definition (e.g., 810 selects the Invoice Transaction Set).
Comments:

Data Element Summary

	<u>Ref.</u>	<u>Data</u>	<u>Attributes</u>
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	ST01	143 Transaction Set Identifier Code	M ID 3/3
		Code uniquely identifying a Transaction Set	
		271 Eligibility, Coverage or Benefit Information	
M	ST02	329 Transaction Set Control Number	M AN 4/9
		Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
		Must be same as SE02	

Segment: **BHT** Beginning of Hierarchical Transaction

Position: 020

Loop:

Level: Heading

Usage: Mandatory

Max Use: 1

Purpose: To define the business hierarchical structure of the transaction set and identify the business application purpose and reference data, i.e., number, date, and time

Syntax Notes:

- Semantic Notes:**
- 1 BHT03 is the number assigned by the originator to identify the transaction within the originator's business application system.
 - 2 BHT04 is the date the transaction was created within the business application system.
 - 3 BHT05 is the time the transaction was created within the business application system.

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	BHT01	1005	Hierarchical Structure Code	M ID 4/4
			Code indicating the hierarchical application structure of a transaction set that utilizes the HL segment to define the structure of the transaction set	
			0022 Information Source, Information Receiver, Subscriber, Dependent	
M	BHT02	353	Transaction Set Purpose Code	M ID 2/2
			Code identifying purpose of transaction set	
			11 Response	
Must Use	BHT03	127	Reference Identification	O AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			Required by HIPAA.	
			This field will return the data value entered in the BHT03 of the 270 Inquiry	
			Submitter Transaction Number (Trace Number)	
			Electronic Data Interchange Message Control Identifier	
			DEERS Length= 20	
Must Use	BHT04	373	Date	O DT 8/8
			Date expressed as CCYYMMDD	
			Required by DEERS/HIPAA.	

Must Use BHT05

337

Transaction Online Calendar Date

DEERS Length=8

Time (HHMMSS)

O TM 4/8

Time expressed in 24-hour clock time as follows: HHMM, or HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds; decimal seconds are expressed as follows: D = tenths (0-9) and DD = hundredths (00-99)

Required by DEERS/HIPAA.

Transaction Online Time

DEERS Length=6

Segment: **HL** Hierarchical Level (Source)

Position: 010

Loop: 2000A Mandatory

Level: Detail

Usage: Mandatory

Max Use: 1

Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		
	Des.	Element	Name	Attributes
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
			1 Sequential	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
			20 Information Source	
			Identifies the payor, maintainer, or source of the information	
Must Use	HL04	736	Hierarchical Child Code	O ID 1/1
			Code indicating if there are hierarchical child data segments subordinate to the level being described	
			Required by DEERS/HIPAA.	

- 1 Additional Subordinate HL Data Segment in This Hierarchical Structure.

Segment: **NM1** Individual or Organizational Name (Source)
Position: 030
Loop: 2100A Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			P5 Plan Sponsor	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			2 Non-Person Entity	
Dep	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			DMDCDEER S DMDC Defense Eligibility and Enrollment System	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS/HIPAA.	
			46 Electronic Transmitter Identification Number (ETIN)	
			A unique number assigned to each transmitter and software developer	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS/HIPAA.	
			DMDCDEERS1600NB	
			Electronic Transmitter ID Number (ETIN)	

Segment: **HL** Hierarchical Level (Receiver)
Position: 010
Loop: 2000B Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		
	Des.	Element	Name	Attributes
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		2	Incremental	
Must Use	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	
			Required by DEERS/HIPAA.	
		1	Identifies the hierarchical level to which this level is subordinate	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		21	Information Receiver	

Identifies the provider or party(ies) who are the recipient(s) of the information

Must Use**HL04****736****Hierarchical Child Code****O ID 1/1**

Code indicating if there are hierarchical child data segments subordinate to the level being described

Required by DEERS/HIPAA.

1 Additional Subordinate HL Data Segment in This Hierarchical Structure.

Segment: **NM1** Individual or Organizational Name (Receiver)
Position: 030
Loop: 2100B Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			1P Provider	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			2 Non-Person Entity	
Must Use	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Required by DEERS.	
			Trading Partner defined value.	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS/HIPAA.	
			SV Service Provider Number	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS/HIPAA.	
			(Assigned by DEERS)	
			Site ID	
			DEERS Length=6	

Segment: **HL** Hierarchical Level (Subscriber)
Position: 010
Loop: 2000C Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Notes: The Subscriber Level is always returned.

Data Element Summary

	<u>Ref.</u>	<u>Data</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	HL01	628	Hierarchical ID Number		M AN 1/12
A unique number assigned by the sender to identify a particular data segment in a hierarchical structure					
3 Incremental					
Must Use	HL02	734	Hierarchical Parent ID Number		O AN 1/12
Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to					
Required by DEERS/HIPAA.					
2 Identifies the hierarchical level to which this level is subordinate					
M	HL03	735	Hierarchical Level Code		M ID 1/2
Code defining the characteristic of a level in a hierarchical structure					
22 Subscriber					

Identifies the employee or group member who is covered for insurance and to whom, or on behalf of whom, the insurer agrees to pay benefits

M**HL04****736****Hierarchical Child Code****M ID 1/2**

Code indicating if there are hierarchical child data segments subordinate to the level being described

22

Subscriber

Segment: **TRN** Trace**Position:** 020**Loop:** 2000C Mandatory**Level:** Detail**Usage:** Optional**Max Use:** 1**Purpose:** To uniquely identify a transaction to an application**Syntax Notes:**

- Semantic Notes:**
- 1 TRN02 provides unique identification for the transaction.
 - 2 TRN03 identifies an organization.
 - 3 TRN04 identifies a further subdivision within the organization.

Comments:**Data Element Summary**

	Ref.	Data	Attributes
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	TRN01	481 Trace Type Code	M ID 1/2
		Code identifying which transaction is being referenced	
		2 Referenced Transaction Trace Numbers	
M	TRN02	127 Reference Identification	M AN 1/30
		Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
		Reserved for discussion.	
		Submitter Transaction Number [Trace Number <or> (ISA, GS, ST Control)]	
		Electronic Data Interchange Message Control Number	
		DEERS Length=20	
Must Use	TRN03	509 Originating Company Identifier	O AN 10/10
		A unique identifier designating the company initiating the funds transfer instructions. The first character is one-digit ANSI identification code designation (ICD) followed by the nine-digit identification number which may be an IRS employer identification number (EIN), data universal numbering system (DUNS), or a user assigned number; the ICD for an EIN is 1, DUNS is 3, user assigned number is 9	
		Reserved for discussion.	
	TRN04	127 Reference Identification	O AN 1/30
		Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
		Reserved for discussion.	

Segment: **NM1** Individual or Organizational Name (Subscriber)
Position: 030
Loop: 2100C Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code Code identifying an organizational entity, a physical location, property or an individual IL Insured or Subscriber	M ID 2/3
M	NM102	1065	Entity Type Qualifier Code qualifying the type of entity 1 Person	M ID 1/1
Must Use	NM103	1035	Name Last or Organization Name Individual last name or organizational name Required by DEERS. Person Last Name DEERS Length=26	O AN 1/35
Must Use	NM104	1036	Name First Individual first name Required by DEERS. Person First Name DEERS Length=20	O AN 1/25
Dep	NM105	1037	Name Middle Individual middle name or initial Person Middle Name DEERS Length=20	O AN 1/25
Must Use	NM106	1038	Name Prefix Prefix to individual name	O AN 1/10

Dep	NM107	1039	Required by DEERS.			
			Rank Code DEERS Length=6			
			Name Suffix		O	AN 1/10
			Suffix to individual name			
Must Use	NM108	66	Person Cadency Name DEERS Length=4			
			Identification Code Qualifier		X	ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)			
			Required by DEERS.			
			MI Member Identification Number			
Must Use	NM109	67	Identification Code		X	AN 2/80
			Code identifying a party or other code			
			Required by DEERS. (2 field concatenation)			
			M=Patient ID			
			Patient Identifier DEERS Length =10			

Segment:	REF Reference Identification
Position:	040
Loop:	2100C Mandatory
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To specify identifying information
Syntax Notes:	<ol style="list-style-type: none"> 1 At least one of REF02 or REF03 is required. 2 If either C04003 or C04004 is present, then the other is required. 3 If either C04005 or C04006 is present, then the other is required.
Semantic Notes:	<ol style="list-style-type: none"> 1 REF04 contains data relating to the value cited in REF02.
Comments:	

Data Element Summary

	<u>Ref.</u> <u>Des.</u>	<u>Data</u> <u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier Code qualifying the Reference Identification HJ Identity Card Number Number assigned to an individual by a government SY Social Security Number	M ID 2/3
Must Use	REF02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Required by DEERS/HIPAA. (2-field concatenation) when using HJ in REF01. D= Temporary ID F= Foreign Identification Person Identifier Type Code DEERS Length=1 <or> Social Security Number Person Identifier DEERS Length= 9	X AN 1/30

Segment: **REF** **Reference Identification**

Position: 040

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To specify identifying information

Syntax Notes:

- 1 At least one of REF02 or REF03 is required.
- 2 If either C04003 or C04004 is present, then the other is required.
- 3 If either C04005 or C04006 is present, then the other is required.

Semantic Notes:

- 1 REF04 contains data relating to the value cited in REF02.

Comments:

Data Element Summary

	<u>Ref.</u> <u>Des.</u>	<u>Data</u> <u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier Code qualifying the Reference Identification ML Military Rank/Civilian Pay Grade Number	M ID 2/3
Must Use	REF02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Pay Grade Code DEERS Length=2	X AN 1/30

Segment: **N3** Address Information
Position: 060
Loop: 2100C Mandatory
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify the location of the named party
Syntax Notes:
Semantic Notes:
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	N301	166	Address Information	M AN 1/55
			Address information	
			Mailing Address Line 1 Text	
			DEERS Length=40	
Dep	N302	166	Address Information	O AN 1/55
			Address information	
			Mailing Address Line 2 Text	
			DEERS Length=40	

Segment: **N4** Geographic Location

Position: 070

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To specify the geographic place of the named party

Syntax Notes: 1 If N406 is present, then N405 is required.

Semantic Notes:

Comments:

- 1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location.
- 2 N402 is required only if city name (N401) is in the U.S. or Canada.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
Must Use	N401	19	City Name	O AN 2/30
			Free-form text for city name	
			Required by DEERS.	
			Mailing Address City Name	
			DEERS Length=20	
Dep	N402	156	State or Province Code	O ID 2/2
			Code (Standard State/Province) as defined by appropriate government agency	
			Mailing Address US Postal Region State Code	
			DEERS Length=2	
Dep	N403	116	Postal Code	O ID 3/15
			Code defining international postal zone code excluding punctuation and blanks (zip code for United States)	
			(2-field concatenation)	
			Mailing Address US Postal Region ZIP Code	
			DEERS Length=5	
			Mailing Address US Postal Region ZIP Extension Code	
			DEERS Length=4	
Must Use	N404	26	Country Code	O ID 2/3
			Code identifying the country	
			Required by DEERS.	
			Mailing Address Country Code	

DEERS Length=2

Segment: **PER** Administrative Communications Contact

Position: 080

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To identify a person or office to whom administrative communications should be directed

Syntax Notes: 1 If either PER03 or PER04 is present, then the other is required.

2 If either PER05 or PER06 is present, then the other is required.

3 If either PER07 or PER08 is present, then the other is required.

Semantic Notes:

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	PER01	366	Contact Function Code	M ID 2/2
			Code identifying the major duty or responsibility of the person or group named	
			IC Information Contact	
Must Use	PER03	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			HP Home Phone Number	
			WP Work Phone Number	
Must Use	PER04	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	
			Home Telephone Number Code/Work Telephone Number Code	
			DEERS Length=14	
	PER05	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			HP Home Phone Number	
			WP Work Phone Number	
	PER06	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	

Required by DEERS.

Home Telephone Number Code/Work Telephone Number Code

DEERS Length=14

Segment: DMG Demographic Information**Position:** 100**Loop:** 2100C Mandatory**Level:** Detail**Usage:** Optional**Max Use:** 1**Purpose:** To supply demographic information**Syntax Notes:** 1 If either DMG01 or DMG02 is present, then the other is required.**Semantic Notes:** 1 DMG02 is the date of birth.

2 DMG07 is the country of citizenship.

3 DMG09 is the age in years.

Comments:**Data Element Summary**

	Ref.	Data	Name	Attributes
	Des.	Element		
Must Use	DMG01	1250	Date Time Period Format Qualifier	X ID 2/3
Code indicating the date format, time format, or date and time format				
Required by DEERS.				
D8 Date Expressed in Format CCYYMMDD				
Must Use	DMG02	1251	Date Time Period	X AN 1/35
Expression of a date, a time, or range of dates, times or dates and times				
Required by DEERS.				
Person Birth Calendar Date				
DEERS Length=8				
Must Use	DMG03	1068	Gender Code	O ID 1/1
Code indicating the sex of the individual				
Required by DEERS.				
Person Sex Code				
DEERS Length=1				
F Female				
M Male				
U Unknown				

Segment: **INS** Insured Benefit

Position: 110

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To provide benefit information on insured entities

Syntax Notes: 1 If either INS11 or INS12 is present, then the other is required.

Semantic Notes:

- 1 INS01 indicates status of the insured. A "Y" value indicates the insured is a subscriber; an "N" value indicates the insured is a dependent.
- 2 INS10 is the handicapped status indicator. A "Y" value indicates an individual is handicapped; an "N" value indicates an individual is not handicapped.
- 3 INS12 is the date of death.
- 4 INS14, INS15, and INS16 identify where the employee works.
- 5 INS17 is the number assigned to each family member born with the same birth date. This number identifies birth sequence for multiple births allowing proper tracking and response of benefits for each dependent (i.e., twins, triplets, etc.).

Comments:

Data Element Summary

	Ref.	Data		<u>Attributes</u>
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	INS01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
			Y Yes	
M	INS02	1069	Individual Relationship Code	M ID 2/2
			Code indicating the relationship between two individuals or entities	
			18 Self	

Segment: **DTP** Date or Time or Period

Position: 120

Loop: 2100C Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To specify any or all of a date, a time, or a time period

Syntax Notes:

Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.

Comments:

Notes: (If applicable)

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			442 Date of Death	
			Date life terminated	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Person Death Calendar Date	
			DEERS Length=8	

Segment:	EB Eligibility or Benefit Information (Personnel)
Position:	130
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	<p>1 EB01 qualifies EB06 through EB10.</p> <p>2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification.</p> <p>3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.</p>
Comments:	

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	EB01	1390 Eligibility or Benefit Information	M ID 1/2
		Code identifying eligibility or benefit information	
		W Other Source of Data	
		(Personnel)	

Segment:	LS Loop Header
Position:	330
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the next segment begins a loop
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the outer loop. When specified by the standard setting body as mandatory, this segment in combination with "LE", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LS and LE segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	LS01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	
		2120	LOOP ID	

Segment: **NM1** Individual or Organizational Name (Unit)
Position: 340
Loop: 2120C Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			36 Employer	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			2 Non-Person Entity	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS.	
			FA Facility Identification	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS. (3 field concatenation)	
			Service Branch Classification Code DEERS Length=1	
			Personnel Category Code DEERS Length=1	
			Unit Identification Code DEERS Length=8	

Segment:	N4 Geographic Location
Position:	370
Loop:	2120C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To specify the geographic place of the named party
Syntax Notes:	1 If N406 is present, then N405 is required.
Semantic Notes:	
Comments:	1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location. 2 N402 is required only if city name (N401) is in the U.S. or Canada.

Data Element Summary

	Ref.	Data		Attributes
	Des.	Element	Name	
Dep	N403	116	Postal Code	O ID 3/15
			Code defining international postal zone code excluding punctuation and blanks (zip code for United States) (2-field concatenation)	
			Work Location US Postal Region ZIP Code DEERS Length=5	
			Work Location US Postal Region ZIP Extension Code DEERS Length=4	
Must Use	N404	26	Country Code	O ID 2/3
			Code identifying the country Required by DEERS.	
			Unit Location Country Code DEERS Length=2	

Segment:	LE Loop Trailer
Position:	400
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To indicate that the loop immediately preceding this segment is complete
Syntax Notes:	
Semantic Notes:	<p>1 One loop may be nested contained within another loop, provided the inner nested loop terminates before the other loop. When specified by the standards setting body as mandatory, this segment in combination with "LS", must be used. It is not to be used if not specifically set forth for use. The loop identifier in the loop header and trailer must be identical. The value for the identifier is the loop ID of the required loop beginning segment. The loop ID number is given on the transaction set diagram in the appropriate ASC X12 version/release.</p>
Comments:	<p>1 See Figures Appendix for an explanation of the use of the LE and LS segments.</p>

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	LE01	447	Loop Identifier Code	M AN 1/6
			The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE	
		2120	LOOP ID	

Segment: **HL** Hierarchical Level (Dependent)
Position: 010
Loop: 2000D Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Notes: The Dependent Level is only returned if it was requested.

Data Element Summary

	<u>Ref.</u>	<u>Data</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	HL01	628		Hierarchical ID Number	M AN 1/12
				A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
			4	Incremental	
Must Use	HL02	734		Hierarchical Parent ID Number	O AN 1/12
				Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	
				Required by DEERS/HIPAA.	
			3	Identifies the hierarchical level to which this level is subordinate	
M	HL03	735		Hierarchical Level Code	M ID 1/2
				Code defining the characteristic of a level in a hierarchical structure	
			23	Dependent	

Identifies the individual who is affiliated with the subscriber, such as spouse, child, etc., and therefore may be entitled to benefits

Must Use**HL04****736****Hierarchical Child Code****O ID 1/1**

Code indicating if there are hierarchical child data segments subordinate to the level being described

Required by DEERS/HIPAA.

0

No Subordinate HL Segment in This Hierarchical Structure.

Segment: **TRN** Trace (Optional)

Position: 020

Loop: 2000D Optional

Level: Detail

Usage: Optional

Max Use: 3

Purpose: To uniquely identify a transaction to an application

Syntax Notes:

Semantic Notes:

- 1 TRN02 provides unique identification for the transaction.
- 2 TRN03 identifies an organization.
- 3 TRN04 identifies a further subdivision within the organization.

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	TRN01	481	Trace Type Code	M ID 1/2
			Code identifying which transaction is being referenced	
			2 Referenced Transaction Trace Numbers	
M	TRN02	127	Reference Identification	M AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			Reserved for discussion.	
			Submitter Transaction Number [Trace Number <or> (ISA, GS, ST Control Numbers)]	
			Electronic Data Interchange Message Control Number	
			DEERS Length=20	
Must Use	TRN03	509	Originating Company Identifier	O AN 10/10
			A unique identifier designating the company initiating the funds transfer instructions. The first character is one-digit ANSI identification code designation (ICD) followed by the nine-digit identification number which may be an IRS employer identification number (EIN), data universal numbering system (DUNS), or a user assigned number; the ICD for an EIN is 1, DUNS is 3, user assigned number is 9	
			Reserved for discussion.	
Dep	TRN04	127	Reference Identification	O AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			Reserved for discussion	

Segment: **NM1** Individual or Organizational Name (Dependent)
Position: 030
Loop: 2100D Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			03 Dependent	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			1 Person	
Must Use	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Required by DEERS.	
			Person Last Name	
			DEERS Length=26	
Must Use	NM104	1036	Name First	O AN 1/25
			Individual first name	
			Required by DEERS.	
			Person First Name	
			DEERS Length=20	
Dep	NM105	1037	Name Middle	O AN 1/25
			Individual middle name or initial	
			Person Middle Name	
			DEERS Length=20	
Dep	NM107	1039	Name Suffix	O AN 1/10
			Suffix to individual name	

			Person Cadency Name DEERS Length=4		
Must Use	NM108	66	Identification Code Qualifier	X	ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)		
			MI Member Identification Number		
Must Use	NM109	67	Identification Code	X	AN 2/80
			Code identifying a party or other code		
			Required by DEERS.		
			M=Patient ID		
			Patient ID		
			DEERS Length =10		

Segment:	REF Reference Identification
Position:	040
Loop:	2100D Mandatory
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To specify identifying information
Syntax Notes:	<ol style="list-style-type: none"> 1 At least one of REF02 or REF03 is required. 2 If either C04003 or C04004 is present, then the other is required. 3 If either C04005 or C04006 is present, then the other is required.
Semantic Notes:	<ol style="list-style-type: none"> 1 REF04 contains data relating to the value cited in REF02.
Comments:	

Data Element Summary

	<u>Ref.</u> <u>Des.</u>	<u>Data</u> <u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier Code qualifying the Reference Identification HJ Identity Card Number SY Number assigned to an individual by a government	M ID 2/3
Must Use	REF02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Required by DEERS/HIPAA. (2-field concatenation) when using HJ qualifier in the REF01 D= Temporary ID F= Foreign Identification Person Identifier Type Code DEERS Length=1 <or> Social Security Number Person Identifier DEERS Length= 9	X AN 1/30

Segment: **N3** Address Information
Position: 060
Loop: 2100D Mandatory
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To specify the location of the named party
Syntax Notes:
Semantic Notes:
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	N301	166	Address Information	M AN 1/55
			Address information	
			Mailing Address Line 1 Text	
			DEERS Length=40	
Dep	N302	166	Address Information	O AN 1/55
			Address information	
			Mailing Address Line 2 Text	
			DEERS Length=40	

Segment: **N4** Geographic Location

Position: 070

Loop: 2100D Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To specify the geographic place of the named party

Syntax Notes: 1 If N406 is present, then N405 is required.

Semantic Notes:

Comments:

- 1 A combination of either N401 through N404, or N405 and N406 may be adequate to specify a location.
- 2 N402 is required only if city name (N401) is in the U.S. or Canada.

Data Element Summary

	Ref.	Data	Attributes
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
Must Use	N401	19 City Name	O AN 2/30
		Free-form text for city name	
		Required by DEERS.	
		Mailing Address City Name	
		DEERS Length=20	
Dep	N402	156 State or Province Code	O ID 2/2
		Code (Standard State/Province) as defined by appropriate government agency	
		Mailing Address US Postal Region State Code	
		DEERS Length=2	
Dep	N403	116 Postal Code	O ID 3/15
		Code defining international postal zone code excluding punctuation and blanks (zip code for United States)	
		(2-field concatenation)	
		Mailing Address US Postal Region ZIP Code	
		DEERS Length=5	
		Mailing Address US Postal Region ZIP Extension Code	
		DEERS Length=4	
Must Use	N404	26 Country Code	O ID 2/3
		Code identifying the country	
		Required by DEERS.	
		Mailing Address Country Code	

DEERS Length=2

Segment: **PER** Administrative Communications Contact

Position: 080

Loop: 2100D Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To identify a person or office to whom administrative communications should be directed

Syntax Notes: 1 If either PER03 or PER04 is present, then the other is required.

2 If either PER05 or PER06 is present, then the other is required.

3 If either PER07 or PER08 is present, then the other is required.

Semantic Notes:

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	PER01	366	Contact Function Code	M ID 2/2
			Code identifying the major duty or responsibility of the person or group named	
			IC Information Contact	
Must Use	PER03	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			HP Home Phone Number	
			WP Work Phone Number	
Must Use	PER04	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	
			Home Telephone Number/Work Telephone Number	
			DEERS Length=14	
	PER05	365	Communication Number Qualifier	X ID 2/2
			Code identifying the type of communication number	
			Required by DEERS.	
			HP Home Phone Number	
			WP Work Phone Number	
	PER06	364	Communication Number	X AN 1/80
			Complete communications number including country or area code when applicable	
			Required by DEERS.	

Home Telephone Number/Work Telephone Number
DEERS Length=14

Segment: DMG Demographic Information**Position:** 100**Loop:** 2100D Mandatory**Level:** Detail**Usage:** Optional**Max Use:** 1**Purpose:** To supply demographic information**Syntax Notes:** 1 If either DMG01 or DMG02 is present, then the other is required.**Semantic Notes:** 1 DMG02 is the date of birth.

2 DMG07 is the country of citizenship.

3 DMG09 is the age in years.

Comments:**Data Element Summary**

	Ref.	Data	Name	Attributes
	Des.	Element		
Must Use	DMG01	1250	Date Time Period Format Qualifier	X ID 2/3
Code indicating the date format, time format, or date and time format				
Required by DEERS.				
D8 Date Expressed in Format CCYYMMDD				
Must Use	DMG02	1251	Date Time Period	X AN 1/35
Expression of a date, a time, or range of dates, times or dates and times				
Required by DEERS.				
Person Birth Calendar Date				
DEERS Length=8				
Must Use	DMG03	1068	Gender Code	O ID 1/1
Code indicating the sex of the individual				
Required by DEERS.				
Person Sex Code				
DEERS Length=1				
F Female				
M Male				
U Unknown				

Segment: **INS** Insured Benefit

Position: 110

Loop: 2100D Mandatory

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To provide benefit information on insured entities

Syntax Notes: 1 If either INS11 or INS12 is present, then the other is required.

Semantic Notes:

- 1 INS01 indicates status of the insured. A "Y" value indicates the insured is a subscriber; an "N" value indicates the insured is a dependent.
- 2 INS10 is the handicapped status indicator. A "Y" value indicates an individual is handicapped; an "N" value indicates an individual is not handicapped.
- 3 INS12 is the date of death.
- 4 INS14, INS15, and INS16 identify where the employee works.
- 5 INS17 is the number assigned to each family member born with the same birth date. This number identifies birth sequence for multiple births allowing proper tracking and response of benefits for each dependent (i.e., twins, triplets, etc.).

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	INS01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
			N No	
			Insured person is a Dependent.	
M	INS02	1069	Individual Relationship Code	M ID 2/2
			Code indicating the relationship between two individuals or entities	
			01 Spouse	
			19 Child	
			Dependent between the ages of 0 and 19; age qualifications may vary depending on policy	
			21 Unknown	
			34 Other Adult	

Segment: **DTP** **Date or Time or Period**
Position: 120
Loop: 2100D Mandatory
Level: Detail
Usage: Optional (Must Use)
Max Use: 1
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:
Semantic Notes: 1 DTP02 is the date or time or period format that will appear in DTP03.
Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	DTP01	374	Date/Time Qualifier	M ID 3/3
			Code specifying type of date or time, or both date and time	
			442 Date of Death	
			Date life terminated	
M	DTP02	1250	Date Time Period Format Qualifier	M ID 2/3
			Code indicating the date format, time format, or date and time format	
			D8 Date Expressed in Format CCYYMMDD	
M	DTP03	1251	Date Time Period	M AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			Person Death Calendar Date	
			DEERS Length=8	

Segment: **SE** Transaction Set Trailer
Position: 410
Loop:
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments)
Syntax Notes:
Semantic Notes:
Comments: 1 SE is the last segment of each transaction set.

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	SE01	96 Number of Included Segments	M N0 1/10
		Total number of segments included in a transaction set including ST and SE segments	
		Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
M	SE02	329 Transaction Set Control Number	M AN 4/9
		Must be same as ST02	

2.3. 271 Error Response

Functional Group ID=**HB**

Introduction:

This Draft Standard for Trial Use contains the format and establishes the data contents of the Eligibility, Coverage or Benefit Information Transaction Set (271) for use within the context of an Electronic Data Interchange (EDI) environment. This transaction set can be used to communicate information about or changes to eligibility, coverage or benefits from information sources (such as - insurers, sponsors, payers) to information receivers (such as - physicians, hospitals, repair facilities, third party administrators, governmental agencies). This information includes but is not limited to: benefit status, explanation of benefits, coverages, dependent coverage level, effective dates, amounts for co-insurance, co-pays, deductibles, exclusions and limitations.

Heading:

	Pos.	Seg.		Req.		Loop	Notes and
	No.	ID	Name	Des.	Max.Use	Repeat	Comments
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	Pos.	Seg.		Req.		Loop	Notes and
	No.	ID	Name	Des.	Max.Use	Repeat	Comments
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
	025	AAA	Request Validation	O	1		
			LOOP ID - 2100A			1	
	030	NM1	Individual or Organizational Name	O	1		
	085	AAA	Request Validation	O	1		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
	030	NM1	Individual or Organizational Name	O	1		
	085	AAA	Request Validation	O	1		
			LOOP ID - 2000C			1	
M	010	HL	Hierarchical Level (Subscriber)	M	1		
			LOOP ID - 2100C			1	
	030	NM1	Individual or Organizational Name	O	1		

	040	REF	Reference Identification	O	1	
	085	AAA	Request Validation	O	1	
			LOOP ID - 2110C		>1	
	130	EB	Eligibility or Benefit Information	O	1	
	160	AAA	Request Validation	O	1	
	250	MSG	Message Text	O	1	
	400	LE	Loop Trailer	O	1	
			LOOP ID - 2000D		1	
M	010	HL	Hierarchical Level (Dependent)	M	1	
			LOOP ID - 2100D		1	
	030	NM1	Individual or Organizational Name	O	1	
	085	AAA	Request Validation	O	1	
			LOOP ID - 2110D		1	
	130	EB	Eligibility or Benefit Information	O	1	
	160	AAA	Request Validation	O	1	
	250	MSG	Message Text	O	1	
M	410	SE	Transaction Set Trailer	M	1	

Segment: **ST** Transaction Set Header

Position: 010

Loop:

Level: Heading

Usage: Mandatory

Max Use: 1

Purpose: To indicate the start of a transaction set and to assign a control number

Syntax Notes:

Semantic Notes: 1 The transaction set identifier (ST01) is used by the translation routines of the interchange partners to select the appropriate transaction set definition (e.g., 810 selects the Invoice Transaction Set).

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	ST01	143	Transaction Set Identifier Code	M ID 3/3
			Code uniquely identifying a Transaction Set	
			271 Eligibility, Coverage or Benefit Information	
M	ST02	329	Transaction Set Control Number	M AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
			Must be same as ST02	

Segment: **BHT** Beginning of Hierarchical Transaction

Position: 020

Loop:

Level: Heading

Usage: Mandatory

Max Use: 1

Purpose: To define the business hierarchical structure of the transaction set and identify the business application purpose and reference data, i.e., number, date, and time

Syntax Notes:

- Semantic Notes:**
- 1 BHT03 is the number assigned by the originator to identify the transaction within the originator's business application system.
 - 2 BHT04 is the date the transaction was created within the business application system.
 - 3 BHT05 is the time the transaction was created within the business application system.

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	BHT01	1005	Hierarchical Structure Code	M ID 4/4
			Code indicating the hierarchical application structure of a transaction set that utilizes the HL segment to define the structure of the transaction set	
			0022 Information Source, Information Receiver, Subscriber, Dependent	
M	BHT02	353	Transaction Set Purpose Code	M ID 2/2
			Code identifying purpose of transaction set	
			11 Response	
Must Use	BHT03	127	Reference Identification	O AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			Required by DEERS.	
			Submitter Transaction Number (Trace Number)	
			This field will return the data value entered in the BHT03 of the 270 Inquiry.	
	BHT04	373	Date	O DT 8/8
			Date expressed as CCYYMMDD	
			Transaction Online Calendar Date	
			DEERS Length=8	
Must Use	BHT05	337	Time	O TM 4/8
			Time expressed in 24-hour clock time as follows: HHMM, or HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds; decimal seconds	

are expressed as follows: D = tenths (0-9) and DD = hundredths (00-99)

Required by DEERS/HIPAA.

Transaction Online Time

DEERS Length=6

Segment: **HL** Hierarchical Level (Source)

Position: 010

Loop: 2000A Mandatory

Level: Detail

Usage: Mandatory

Max Use: 1

Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of an HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		1	Sequential	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		20	Information Source	
			Identifies the payor, maintainer, or source of the information	
	HL04	736	Hierarchical Child Code	O ID 1/1
			Code indicating if there are hierarchical child data segments subordinate to the level being described	
		1	Additional Subordinate HL Data Segment in This	

Hierarchical Structure.

Segment:	AAA Request Validation
Position:	025
Loop:	2000A Mandatory
Level:	Detail
Usage:	Optional
Max Use:	9
Purpose:	To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:	
Semantic Notes:	1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments:	1 If AAA02 is used, AAA03 contains a code from an industry code list.
Notes:	Use of this segment at this location in the HL is to identify reasons why a request cannot be processed based on the entities identified in ISA06, ISA08, GS02, GS03

Data Element Summary

Ref.	Data			Attributes
Des.	Element	Name		
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
		N	No	
			Use this code to indicate that the request or an element in the request is not valid. The transaction has been rejected as identified by the code in AAA03	
		Y	Yes	
			Use this code to indicate that the request is valid, however the transactions has been rejected as identified in AAA03.	
AAA03	901		Reject Reason Code	O ID 2/2
			Code assigned by issuer to identify reason for rejection	
		42	Unable to Respond at Current Time	
AAA04	889		Follow-up Action Code	O ID 1/1
			Code identifying follow-up actions allowed	
		C	Please Correct and Resubmit	
		R	Resubmission Allowed	

Segment: **NM1** Individual or Organizational Name
Position: 030
Loop: 2100A Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
 2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			P5 Plan Sponsor	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			2 Non-Person Entity	
	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			DMDCEER S DMDCEERS Defense Eligibility and Enrollment System	
Must Use	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			46 Electronic Transmitter Identification Number (ETIN)	
			A unique number assigned to each transmitter and software developer	
Must Use	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS/HIPAA.	
			DMDCEERS1600NB	

Segment:	AAA Request Validation
Position:	085
Loop:	2100A Optional
Level:	Detail
Usage:	Optional
Max Use:	9
Purpose:	To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:	
Semantic Notes:	1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments:	1 If AAA02 is used, AAA03 contains a code from an industry code list.
Notes:	Use this segment to indicate problems in the transaction specifically related to the information source data contained in the original 270 transaction's information source name loop (Loop 2100A) <or> to indicate that the information source itself is experience system problems

Data Element Summary

Ref.	Data			Attributes
<u>Des.</u>	<u>Element</u>	<u>Name</u>		
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
		N	No	
			Use this code to indicate that the request or an element in the request is not valid. The transaction has been rejected as identified by the code in AAA03.	
		Y	Yes	
			Use this code to indicate that the request is valid, however the transaction has been rejected as identified by the code in AAA03.	
	AAA03	901	Reject Reason Code	O ID 2/2
			Code assigned by issuer to identify reason for rejection	
		42	Unable to Respond at Current Time	
	AAA04	889	Follow-up Action Code	O ID 1/1
			Code identifying follow-up actions allowed	
		C	Please Correct and Resubmit	
		R	Resubmission Allowed	

Segment: **HL** Hierarchical Level (Receiver)
Position: 010
Loop: 2000B Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of a HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		2	Sequential	
	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	
			Required by DEERS/HIPAA.	
		1	Identifies the hierarchical level to which this level is subordinate	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		21	Information Receiver	

			Identifies the provider or party(ies) who are the recipient(s) of the information	
HL04	736	Hierarchical Child Code		O ID 1/1
			Code indicating if there are hierarchical child data segments subordinate to the level being described	
		1	Additional Subordinate HL Data Segment in This Hierarchical Structure.	

Segment: **NM1** Individual or Organizational Name
Position: 030
Loop: 2100B Optional
Level: Detail
Usage: Optional (Must use for DEERS)
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

Ref.	Data			
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			1P Provider	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			2 Non-Person Entity	
	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Required by DEERS.	
			Trading Partner defined value.	
	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS/HIPAA.	
			SV Service Provider Number	
	NM109	67	Identification Code	X AN 2/80
			Code identifying a party or other code	
			Required by DEERS/HIPAA.	
			(Assigned by DEERS)	
			Site ID	
			DEERS Length=6	

Segment: **AAA** Request Validation
Position: 085
Loop: 2100B Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

Ref.	Data			
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>	
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
		Code indicating a Yes or No condition or response		
		N	No	
			Use this code to indicate that the request or an element in the request is not valid. The transaction has been rejected as identified by the code in AAA03.	
		Y	Yes	
			Use this code to indicate that the request is valid, however the transaction has been rejected as identified by the code in AAA03.	
AAA03	901	Reject Reason Code		O ID 2/2
		Code assigned by issuer to identify reason for rejection		
		15	Required application data missing	
		42	Unable to Respond at Current Time	
AAA04	889	Follow-up Action Code		O ID 1/1
		Code identifying follow-up actions allowed		
		C	Please Correct and Resubmit	
		R	Resubmission Allowed	

Segment: **HL** Hierarchical Level (Subscriber)
Position: 010
Loop: 2000C Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of a HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		3	Incremental	
	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	
		2	Identifies the hierarchical level to which this level is subordinate	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		22	Subscriber	
			Identifies the employee or group member who is covered	

for insurance and to whom, or on behalf of whom, the insurer agrees to pay benefits

HL04	736	Hierarchical Child Code	O ID 1/1
		0	No Subordinate HL Segment in This Hierarchical Structure
		1	Additional Subordinate HL Data Segment in This Hierarchical Structure.

Segment: **NM1** Individual or Organizational Name
Position: 030
Loop: 2100C Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

Ref.	Data			
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			IL Insured or Subscriber	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			1 Person	
	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Required by DEERS.	
			Person Last Name	
			DEERS Length=26	
	NM104	1036	Name First	O AN 1/25
			Individual first name	
			Required by DEERS.	
			Person First Name	
			DEERS Length=20	
	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS.	
			MI Member Identification Number	
	NM109	67	Identification Code	X AN 2/80

Code identifying a party or other code

Required by DEERS

Patient Identifier

DEERS Length = 10

Segment:	REF Reference Identification
Position:	040
Loop:	2100C Optional
Level:	Detail
Usage:	Optional
Max Use:	9
Purpose:	To specify identifying information
Syntax Notes:	<ol style="list-style-type: none"> 1 At least one of REF02 or REF03 is required. 2 If either C04003 or C04004 is present, then the other is required. 3 If either C04005 or C04006 is present, then the other is required.
Semantic Notes:	<ol style="list-style-type: none"> 1 REF04 contains data relating to the value cited in REF02.
Comments:	

Data Element Summary				
	<u>Ref.</u> <u>Des.</u>	<u>Data</u> <u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier Code qualifying the Reference Identification HJ Identity Card Number Number assigned to an individual by a government SY Social Security Number	M ID 2/3
	REF02	127	Reference Identification Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Required by DEERS/HIPAA. (2-field concatenation) when using HJ in REF01. D= Temporary ID F= Foreign Identification Person Identifier Type Code DEERS Length=1 <or> Social Security Number Person Identifier DEERS Length= 9	X AN 1/30

Segment: **AAA** Request Validation
Position: 085
Loop: 2100C Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

Ref.	Data			
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>	
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
		N	No	
			Use this code to indicate that the request or an element in the request is not valid. The transaction has been rejected as identified by the code in AAA03.	
		Y	Yes	
			Use this code to indicate that the request is valid, however the transaction has been rejected as identified by the code in AAA03.	
AAA03	901		Reject Reason Code	O ID 2/2
			Code assigned by issuer to identify reason for rejection	
		15	Required application data missing	
		56	Inappropriate Date	
		58	Invalid/Missing Date-of-Birth	
		64	Invalid/Missing Patient ID	
		75	Subscriber/Insured Not Found	
AAA04	889		Follow-up Action Code	O ID 1/1
			Code identifying follow-up actions allowed	
		C	Please Correct and Resubmit	
		R	Resubmission Allowed	

Segment:	EB Eligibility or Benefit Information
Position:	130
Loop:	2110C Optional
Level:	Detail
Usage:	Optional
Max Use:	1
Purpose:	To supply eligibility or benefit information
Syntax Notes:	1 If either EB09 or EB10 is present, then the other is required.
Semantic Notes:	1 EB01 qualifies EB06 through EB10. 2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification. 3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.
Comments:	

Data Element Summary

Ref.	Data		Attributes
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	EB01	1390 Eligibility or Benefit Information	M ID 1/2
		Code identifying eligibility or benefit information	
		V Cannot Process	

Segment: **AAA** Request Validation
Position: 160
Loop: 2110C Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

Ref.	Data			
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>	
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
		N	No	
			Use this code to indicate that the request or an element in the request is not valid. The transaction has been rejected as identified by the code in AAA03.	
		Y	Yes	
			Use this code to indicate that the request is valid, however the transaction has been rejected as identified in AAA03.	
AAA03	901	Reject Reason Code		O ID 2/2
			Code assigned by issuer to identify reason for rejection	
		15	Required application data missing	
		53	Inquired Benefit Inconsistent with Provider Type	
AAA04	889	Follow-up Action Code		O ID 1/1
			Code identifying follow-up actions allowed	
		C	Please Correct and Resubmit	
		R	Resubmission Allowed	

Segment: **MSG** Message Text

Position: 250

Loop: 2110C Optional

Level: Detail

Usage: Optional

Max Use: 10

Purpose: To provide a free-form format that allows the transmission of text information

Syntax Notes: 1 If MSG03 is present, then MSG02 is required.

Semantic Notes: 1 MSG03 is the number of lines to advance before printing.

Comments: 1 MSG02 is not related to the specific characteristics of a printer, but identifies top of page, advance a line, etc.
2 If MSG02 is "AA - Advance the specified number of lines before print" then MSG03 is required.

Data Element Summary

Ref.	Des.	Data		Attributes
		<u>Element</u>	<u>Name</u>	
M	MSG01	933	Free-Form Message Text	M AN 1/264
			Free-form message text	
		MTFIQBR01	Invalid Coverage Level - Individual/Family - Code	
		MTFIQBR02	Missing both Subscriber and Dependent HL	
		MTFIQBR03	Person ID missing for Subscriber Inquiry	
		MTFIQBR04	Invalid Person Type Code	
		MTFIQBR07	Invalid HCDP-Service Type Code	
		MTFIQBR09	Inquiry End Date Before Begin Date	
		MTFIQBR10	Date of Birth Greater the Today's Date	
		MTFIQBR90	Trace Number Too Long	

Segment: HL Hierarchical Level (Dependent)

Position: 010
Loop: 2000D Mandatory
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To identify dependencies among and the content of hierarchically related groups of data segments

Syntax Notes:**Semantic Notes:**

- Comments:**
- 1 The HL segment is used to identify levels of detail information using a hierarchical structure, such as relating line-item data to shipment data, and packaging data to line-item data.
The HL segment defines a top-down/left-right ordered structure.
 - 2 HL01 shall contain a unique alphanumeric number for each occurrence of the HL segment in the transaction set. For example, HL01 could be used to indicate the number of occurrences of the HL segment, in which case the value of HL01 would be "1" for the initial HL segment and would be incremented by one in each subsequent HL segment within the transaction.
 - 3 HL02 identifies the hierarchical ID number of the HL segment to which the current HL segment is subordinate.
 - 4 HL03 indicates the context of the series of segments following the current HL segment up to the next occurrence of a HL segment in the transaction. For example, HL03 is used to indicate that subsequent segments in the HL loop form a logical grouping of data referring to shipment, order, or item-level information.
 - 5 HL04 indicates whether or not there are subordinate (or child) HL segments related to the current HL segment.

Data Element Summary

	Ref.	Data		Attributes
		<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	HL01	628	Hierarchical ID Number	M AN 1/12
			A unique number assigned by the sender to identify a particular data segment in a hierarchical structure	
		4	Incremental	
	HL02	734	Hierarchical Parent ID Number	O AN 1/12
			Identification number of the next higher hierarchical data segment that the data segment being described is subordinate to	
		3	Identifies the hierarchical level to which this level is subordinate	
M	HL03	735	Hierarchical Level Code	M ID 1/2
			Code defining the characteristic of a level in a hierarchical structure	
		23	Dependent	
			Identifies the individual who is affiliated with the	

subscriber, such as spouse, child, etc., and therefore may be entitled to benefits

HL04**736****Hierarchical Child Code****O ID 1/1**

Code indicating if there are hierarchical child data segments subordinate to the level being described

0

No Subordinate HL Segment in This Hierarchical Structure.

Segment: **NM1** Individual or Organizational Name
Position: 030
Loop: 2100D Optional
Level: Detail
Usage: Optional
Max Use: 1
Purpose: To supply the full name of an individual or organizational entity
Syntax Notes: 1 If either NM108 or NM109 is present, then the other is required.
2 If NM111 is present, then NM110 is required.
Semantic Notes: 1 NM102 qualifies NM103.
Comments: 1 NM110 and NM111 further define the type of entity in NM101.

Data Element Summary

Ref.	Data			
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	NM101	98	Entity Identifier Code	M ID 2/3
			Code identifying an organizational entity, a physical location, property or an individual	
			03 Dependent	
M	NM102	1065	Entity Type Qualifier	M ID 1/1
			Code qualifying the type of entity	
			1 Person	
	NM103	1035	Name Last or Organization Name	O AN 1/35
			Individual last name or organizational name	
			Required by DEERS.	
			Person Last Name	
			DEERS Length=26	
	NM104	1036	Name First	O AN 1/25
			Individual first name	
			Required by DEERS.	
			Person First Name	
			DEERS Length=20	
	NM108	66	Identification Code Qualifier	X ID 1/2
			Code designating the system/method of code structure used for Identification Code (67)	
			Required by DEERS/HIPAA.	

Patient ID
DEERS Length=10

Segment: **REF** Reference Identification

Position: 040
Loop: 2100C Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify identifying information
Syntax Notes:

- 1 At least one of REF02 or REF03 is required.
- 2 If either C04003 or C04004 is present, then the other is required.
- 3 If either C04005 or C04006 is present, then the other is required.

Semantic Notes:

- 1 REF04 contains data relating to the value cited in REF02.

Comments:

Data Element Summary

	Ref.	Data		
	<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	REF01	128	Reference Identification Qualifier	M ID 2/3
			Code qualifying the Reference Identification	
			HJ Identity Card Number	
			Number assigned to an individual by a government	
			SY Social Security Number	
	REF02	127	Reference Identification	X AN 1/30
			Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier	
			Required by DEERS/HIPAA.	
			(2-field concatenation) when using HJ in REF01.	
			D= Temporary ID	
			F= Foreign Identification	
			Person Identifier Type Code	
			DEERS Length=1	
			<or>	
			Social Security Number	
			Person Identifier	
			DEERS Length= 9	

Segment: **AAA** Request Validation
Position: 085
Loop: 2100D Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

Ref.	Data			
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>	
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
		Code indicating a Yes or No condition or response		
		N	No	
		Y	Yes	
	AAA03	901	Reject Reason Code	O ID 2/2
		Code assigned by issuer to identify reason for rejection		
		15	Required application data missing	
		56	Inappropriate Date	
		58	Invalid/Missing Date-of-Birth	
		64	Invalid/Missing Patient ID	
		67	Patient Not Found	
	AAA04	889	Follow-up Action Code	O ID 1/1
		Code identifying follow-up actions allowed		
		C	Please Correct and Resubmit	
		R	Resubmission Allowed	

Segment: **EB** Eligibility or Benefit Information

Position: 130

Loop: 2110D Optional

Level: Detail

Usage: Optional

Max Use: 1

Purpose: To supply eligibility or benefit information

Syntax Notes: 1 If either EB09 or EB10 is present, then the other is required.

Semantic Notes: 1 EB01 qualifies EB06 through EB10.

2 EB11 is the authorization or certification indicator. A "Y" value indicates that an authorization or certification is required per plan provisions. An "N" value indicates that an authorization or certification is not required per plan provisions. A "U" value indicates it is unknown whether the plan provisions require an authorization or certification.

3 EB12 is the plan network indicator. A "Y" value indicates the benefits identified are considered In-Plan-Network. An "N" value indicates that the benefits identified are considered Out-Of-Plan-Network. A "U" value indicates it is unknown whether the benefits identified are part of the Plan Network.

Comments:

Data Element Summary

Ref.	Data		Attributes
	<u>Des.</u>	<u>Element</u> <u>Name</u>	
M	EB01	1390 Eligibility or Benefit Information	M ID 1/2
		Code identifying eligibility or benefit information	
		V Cannot Process	

Segment: **AAA** Request Validation
Position: 160
Loop: 2110D Optional
Level: Detail
Usage: Optional
Max Use: 9
Purpose: To specify the validity of the request and indicate follow-up action authorized
Syntax Notes:
Semantic Notes: 1 AAA01 designates whether the request is valid or invalid. Code "Y" indicates that the code is valid; code "N" indicates that the code is invalid.
Comments: 1 If AAA02 is used, AAA03 contains a code from an industry code list.

Data Element Summary

Ref.	Data			Attributes
<u>Des.</u>	<u>Element</u>	<u>Name</u>		
M	AAA01	1073	Yes/No Condition or Response Code	M ID 1/1
			Code indicating a Yes or No condition or response	
		N	No	
			Use this code to indicate that the request or an element in the request is not valid. The transaction has been rejected as identified by the code in AAA03.	
		Y	Yes	
			Use this code to indicate that the request is valid, however the transaction has been rejected as identified in AAA03.	
AAA03	901		Reject Reason Code	O ID 2/2
			Code assigned by issuer to identify reason for rejection	
		15	Required application data missing	
		53	Inquired Benefit Inconsistent with Provider Type	
		56	Inappropriate Date	
AAA04	889		Follow-up Action Code	O ID 1/1
			Code identifying follow-up actions allowed	
		C	Please Correct and Resubmit	
		R	Resubmission Allowed	

Segment: **MSG** Message Text

Position: 250

Loop: 2110D Optional

Level: Detail

Usage: Optional

Max Use: 10

Purpose: To provide a free-form format that allows the transmission of text information

Syntax Notes: 1 If MSG03 is present, then MSG02 is required.

Semantic Notes: 1 MSG03 is the number of lines to advance before printing.

Comments: 1 MSG02 is not related to the specific characteristics of a printer, but identifies top of page, advance a line, etc.
2 If MSG02 is "AA - Advance the specified number of lines before print" then MSG03 is required.

Data Element Summary

Ref.	Data		
<u>Des.</u>	<u>Element</u>	<u>Name</u>	<u>Attributes</u>
M	MSG01	933 Free-Form Message Text	M AN 1/264
		Free-form message text	
		MTFIQBR01 Invalid Coverage Level - Individual/Family - Code	
		MTFIQBR02 Missing both Subscriber and Dependent HL	
		MTFIQBR03 Person ID missing for Subscriber Inquiry	
		MTFIQBR04 Invalid Person Type Code	
		MTFIQBR07 Invalid HCDP-Service Type Code	
		MTFIQBR09 Inquiry End Date Before Begin Date	
		MTFIQBR10 Date of Birth Greater the Today's Date	
		MTFIQBR90 Trace Number Too Long	

Segment: **SE** Transaction Set Trailer
Position: 410
Loop:
Level: Detail
Usage: Mandatory
Max Use: 1
Purpose: To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments)
Syntax Notes:
Semantic Notes:
Comments: 1 SE is the last segment of each transaction set.

Data Element Summary

	Ref.	Data		<u>Attributes</u>
		<u>Des.</u>	<u>Element Name</u>	
M	SE01	96	Number of Included Segments	M N0 1/10
			Total number of segments included in a transaction set including ST and SE segments	
M	SE02	329	Transaction Set Control Number	M AN 4/9
			Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set	
			Must be the same as ST01	

3. Business Data Processing Agreements

The following pages are business data processing agreements reached by CHCS and DEERS while exchanging electronic messages via the X12 Interface Engine.

The DEERS X12 Interface Engine operates as a 24 hour 7 day a week application with the exception of scheduled maintenance window. Maintenance Monday – Friday 11:56 p.m. – 1:00 a.m. EST and Saturday 9:00p.m. -- Sunday 6:00a.m. EST (subject to change upon notice).

3.1. Communication Protocol

3.1.1. Introduction

This section provides a description of how CHCS will communicate with DEERS. The HyperText Transfer Protocol (HTTP) has been selected as the network application protocol by which such communication will occur. DMDC will make available a Web server that will act as an intermediary between CHCS and the DEERS X12 translation engine.

At a fundamental level, CHCS must accomplish the following to communicate with DEERS:

- Connect to the DMDC Web server by using the basic constructs of TCP/IP sockets.
- Package an X12 message in an HTTP formatted request
- Send the HTTP request to the Web server.
- Receive an HTTP response containing the X12 response.

This is not the *only* method by which the HTTP connection/request/response interaction could occur. Some programming languages provide more abstracted methods of using HTTP. For example, Java has several HTTP-related classes, e.g., the `URLConnection` class that could be used instead of the `Socket` class; if such a method is available, then it would be prudent to explore the possibility of utilizing it.

It should be noted that CHCS is NOT required to implement its own Web server.

DEERS expects each CHCS system to have two or more processes or threads communicating with DEERS, via the HTTP protocol described above, at the same time. CHCS may be required to open more connections to DEERS (via the Web server) than are currently used in CHCS's communications with legacy DEERS. The number of connections needed should be adjusted during performance tuning and based on the expected volume of transactions from the particular CHCS site. CHCS and DEERS will jointly develop performance tuning data and guidelines during the contractor-testing phase of the project.

3.1.2. HTTP and the POST Request

HTTP is the application protocol that forms the backbone of the World Wide Web. HTTP has a number of request methods, headers, and codes.¹ The "POST" request best suites the communication needs of both DMDC and CHCS by allowing a client to send large amounts of data to a Web server within the body of the request.

The following is a generic POST format example:

```
POST <URL> HTTP/1.1
Host: <hostname>
Content-Type: <mime-type>
Content-Length: <length>
```

```
<body>
```

CHCS will utilize the HTTP POST request to send X12 messages to DEERS.² To execute the POST request, CHCS will first open a TCP/IP socket connection to the DMDC Web server. CHCS will then prefix the X12 message with the appropriate POST method headers, an example of which as follows:

¹ For full details on HTTP, see <http://www.w3.org/Protocols/>.

```
POST http://reprisal.int.dmdc.osd.mil/appj/X12/servlet/X12HTTPServlet HTTP/1.1
Host: reprisal.int.dmdc.osd.mil
Content-Type: application/x-www-form-urlencoded
Content-Length: 462
```

```
X12Message=ISA*00*0000000000*00*0000000000*01*901234572000000*01*009088877320000*011014*1840*U*00
401*000000001*0*T*:!GS*HS*901234572000000*009088877320000*20011014*184800*1*X*004010X092!ST*270*0
001!BHT*0022*13*PS101274894DVUP0699f*20011014*184800!HL*1**20*1!NM1*P5*2*DEERS*****46*DMDCDEERS16
00NB!HL*2*1*21*1!NM1*1P*2*CHCS*****SV*101152!HL*3*2*22*0!NM1!IL*1*Fryar!REF*SY*031122599!DMG*D8*1
9710322!EQ*1**FAM*C1!DTP*307*RD8*20010827-20011003!SE*13*0001!GE*1*1!IEA*1*000000001!
```

Notes:

- The URL in the first line of the header is simply an example. The actual URL will be furnished at a later date.
- The blank line between the content-length and the body of the message is required.
- The length referred to in "Content-length" includes the X12 message, the parameter name ("X12Message"), and the "=" sign.
- This is ASCII text in which a CRLF is present after each header line. There are two CRLFs located after the Content-Length that generate a blank line between the header and the body of the request.
- The X12 message itself is one long string. CRLFs are **NOT IMPLIED** after each line within the X12 message. The lines are wrapped due to the limited width of this page.

3.1.3. How CHCS Will Communicate with DEERS

The DMDC Web server will receive the above POST request and route it to a Java servlet that runs on a DMDC application server. The Java servlet then extracts the X12 message from the body of the HTTP POST request, opens a connection to the SeeBeyond Mux eWay, sends the X12 message to the Mux, and waits for a response from the Mux.

The SeeBeyond engine checks the X12 message for HIPAA compliance and then translates it to a proprietary DEERS transfer record (TR). The TR is then sent to DEERS. The SeeBeyond engine waits for and receives the response back from DEERS, translates the response back into HIPAA-compliant X12 format, and then sends the X12 message back through the Mux eWay to the Java servlet.

The Java servlet receives the response from the Mux, packages the response into HTTP format, and sends the response back to CHCS. After having sent the POST request through the socket connection that was created with the DMDC Web server, CHCS will begin reading from that same socket connection. Given that the POST request was formatted similarly to the above example, CHCS will receive the following type of response from the DEERS Web server across the socket connection:

```
HTTP/1.1 200 OK
Date: Wed, 19 Jun 2002 18:26:54 GMT
Server: Oracle9iAS (9.0.2.0.0) Containers for J2EE
Content-Type: text/html

<body - the X12 271 response>
```

² Note: HTTP version 1.1 will be used.

3.1.4. HTTP and State

It should be noted that HTTP is a stateless protocol in which each request/response is executed independently. The connection to the Web server is opened, the request sent, the response received, and the connection closed. State is not maintained between POSTs.

3.2. Security

3.2.1. Introduction

HIPAA legislation mandates protection of the privacy of electronically transmitted health care information. This section provides a description of how CHCS and DEERS will meet this requirement.

3.2.2. Virtual Private Network

In compliance with the Tri-Service Infrastructure Management Program Office (TIMPO) desire to integrate CHCS-to-DEERS security within TIMPO's enterprise-wide security solution for MHS, a Virtual Private Network (VPN) will be responsible for securing the privacy of the data transmitted between DEERS and CHCS. The VPN's primary function will be to perform services to protect and secure the data being sent over the Defense Information System Network (DISN).

3.2.3. Virtual Private Network Equipment

Each CHCS site will be equipped with an Avaya VPN hardware device. Tri-Service Infrastructure Management Program Office (TIMPO) will provide DMDC with a similar, compatible Avaya VPN device, which will reside at Auburn Hills, Michigan. A backup VPN appliance will also be provided and stored at Auburn Hills, to be used in the event of a failure in the primary VPN device.

3.2.4. Management of the Virtual Private Network

DISA will be responsible for the management of the VPN. The roles and responsibilities of CHCS and DMDC still need to be defined, with respect to the installation, configuration, management, maintenance, and response to various types of problems and alerts. DMDC and CHCS/TIMPO will work together to develop such roles, responsibilities, procedures and processes.

DMDC will have the capability of doing real-time monitoring of the VPN status.

3.3. Business Rules Processing

3.3.1. General Processing Requirements

It has been established and agreed upon that the CHCS Interface with DEERS is an on-line/real-time query and response interaction. Each inquiry/update will be encapsulated in an ASC X12 Interchange and Functional Group envelope consistent with the 4010 version of the ASC X12 Standard, and in accordance with the HIPAA 4010X098 Implementation Guideline where applicable.

The agreed upon element delimiter, sub-element delimiter and segment terminator which will be used to construct X12 messages are { * , : , ! } respectively. Each inquiry/update will have a unique trace number assigned by the external-trading partner. The 270/271 BHT03 element must be 20 bytes in length - alphanumeric. The 275 BGN02 element must be 20 bytes in length - alphanumeric.

PERSON IDENTIFICATION

As stated in the EIS, the Inquiry Person ID Type Code and the Inquiry Person ID are required when performing an inquiry if the Patient ID is not used. The sponsor's Inquiry Person Id Type Code and Inquiry Person ID or the sponsor's Patient ID is should be supplied on all inquiries, exclusion of such data may result in misleading or incorrect response.

PARTIAL MATCH

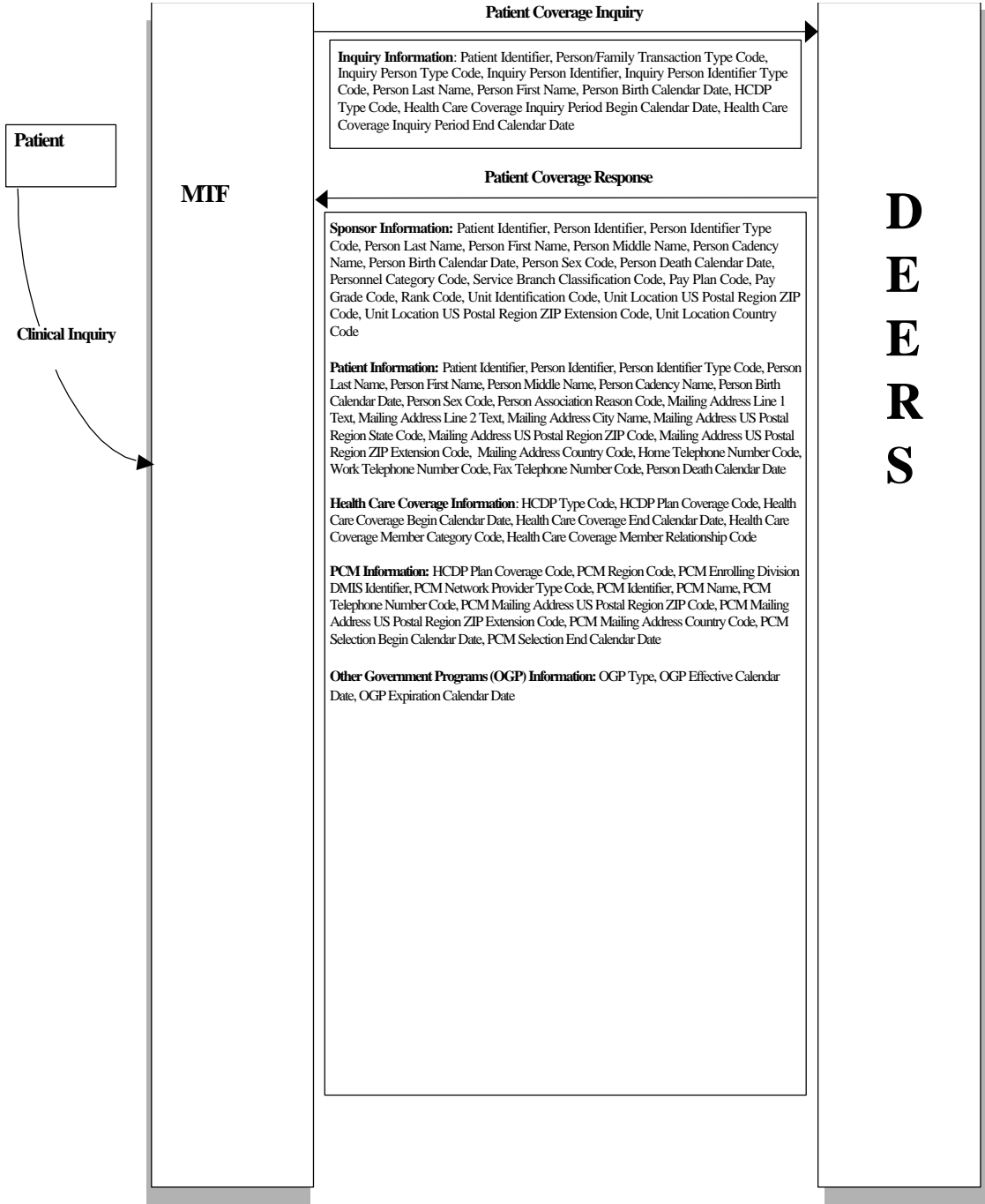
In those instances where multiple dependents where found the X12 DEERS Interface Engine will return only the sponsor person information of the families found.

INQUIRIES

The X12 DEERS Interface Engine will return negative acknowledgement of no health care coverage. The Health Care Delivery Program Coverage Code of 000 will be returned. When performing a dependent inquiry, providing the required sponsor level information, if the individual is not found no other family information will be returned. One can re-inquire using a unique ID or perform a sponsor level family inquiry.

APPENDIX A

270 DATA MAPPING SAMPLE



Health Care Coverage Inquiry for MTFs

Appendix A: 270 Data Mapping Sample

Heading: DEERS Standard 270 MTF Eligibility Inquiry

	Pos.	Seg.		Req.		Loop	Notes and
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	Pos.	Seg.		Req.		Loop	Notes and
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
			LOOP ID - 2100A			1	
M	030	NM1	Individual or Organizational Name (Source)	M	1		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
M	030	NM1	Individual or Organizational Name (Receiver)	M	1		
			LOOP ID - 2000C			1	
M	010	HL	Hierarchical Level (Subscriber)	M	1		
			LOOP ID - 2100C			1	
M	030	NM1	Individual or Organizational Name (Subscriber)	M	1		
Dep	040	REF	Reference Identification	O	1		
	100	DMG	Demographic Information	O	1		
			LOOP ID - 2110C			1	
Dep	130	EQ	Eligibility or Benefit Inquiry (Subscriber)	O	1		
Dep	200	DTP	Date or Time or Period	O	1		
			LOOP ID - 2000D			1	
Dep	010	HL	Hierarchical Level (Dependent)	O	1		
			LOOP ID - 2100D			1	
M	030	NM1	Individual or Organizational Name (Dependent)	M	1		
Dep	040	REF	Reference Identification	O	1		
	100	DMG	Demographic Information	O	1		
			LOOP ID - 2110D			1	
M	130	EQ	Eligibility or Benefit Inquiry	O	1		
	200	DTP	Date or Time or Period	O	1		
M	210	SE	Transaction Set Trailer	M	1		

Heading: 270 Sponsor Inquiry using Patient ID

	Pos.	Seg.		Req.		Loop	Notes and
	No.	ID	Name	Des.	Max.Use	Repeat	Comments
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	Pos.	Seg.		Req.		Loop	Notes and
	No.	ID	Name	Des.	Max.Use	Repeat	Comments
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
			LOOP ID - 2100A			1	
M	030	NM1	Individual or Organizational Name (Source)	M	1		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
M	030	NM1	Individual or Organizational Name (Receiver)	M	1		
			LOOP ID - 2000C			1	
M	010	HL	Hierarchical Level (Subscriber)	M	1		
			LOOP ID - 2100C			1	
M	030	NM1	Individual or Organizational Name (Subscriber)	M	1		
			LOOP ID - 2110C			1	
Dep	130	EQ	Eligibility or Benefit Inquiry (Subscriber)	O	1		
Dep	200	DTP	Date or Time or Period	O	1		
M	210	SE	Transaction Set Trailer	M	1		

Heading: 270 Dependent Inquiry using Dependent SSN, Name, Date of Birth

	<u>Pos.</u>	<u>Seg.</u>		<u>Req.</u>		<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	<u>Pos.</u>	<u>Seg.</u>		<u>Req.</u>		<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
			LOOP ID - 2100A			1	
M	030	NM1	Individual or Organizational Name (Source)	M	1		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
M	030	NM1	Individual or Organizational Name (Receiver)	M	1		
			LOOP ID - 2000C			1	
M	010	HL	Hierarchical Level (Subscriber)	M	1		
			LOOP ID - 2100C			1	
M	030	NM1	Individual or Organizational Name (Subscriber)	M	1		
			LOOP ID - 2000D			1	
Dep	010	HL	Hierarchical Level (Dependent)	O	1		
			LOOP ID - 2100D			1	
M	030	NM1	Individual or Organizational Name (Dependent)	M	1		
Dep	040	REF	Reference Identification	O	1		
	100	DMG	Demographic Information	O	1		
			LOOP ID - 2110D			1	
M	130	EQ	Eligibility or Benefit Inquiry	O	1		
	200	DTP	Date or Time or Period	O	1		
M	210	SE	Transaction Set Trailer	M	1		

270 Eligibility Inquiry Sample Data**Dependent Inquiry:**

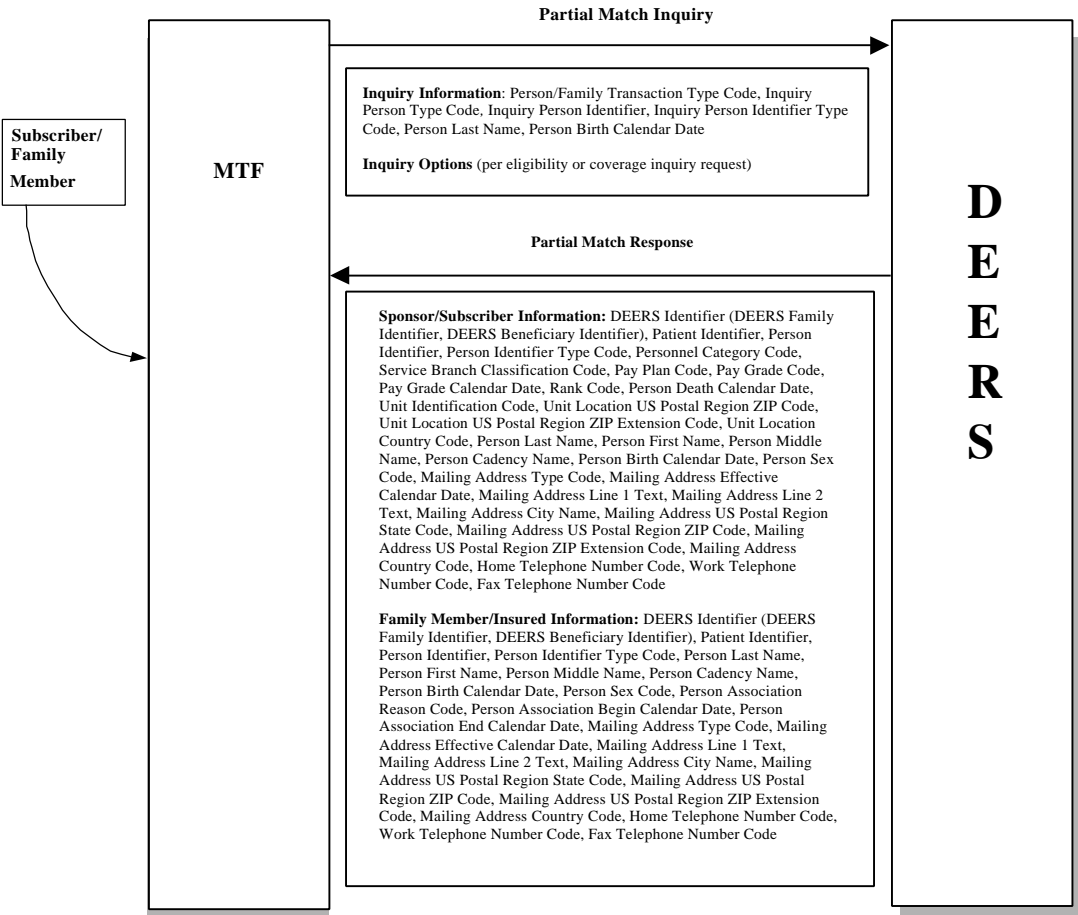
ISA*00*0000000000*00*0000000000*ZZ*AGA000000000000*ZZ*DMDCDEERS1600NB*020906*1230*U*00
401*000000001*0*T*!GS*HS*AGA000000000000*DMDCDEERS1600NB*20011014*184800*1*X*004010X0
92!ST*270*0001!BHT*0022*13*GaryMTFInqSSNNameDoB*20011014*184800!HL*1**20*1!NM1*P5*2*DEE
RS*****46*DMDCDEERS1600NB!HL*2*1*21*1!NM1*1P*2*CHCS*****SV*700091!HL*3*2*22*1!NM1*IL
*1*Perkins*REF*SY*011368715!HL*4*2*22*0!NM1*03*1*Perkins!REF*SY*331568625!DMG*D8*19961012!
EQ*1**IND*C1!DTP*307*RD8*20010801-20020517!SE*16*0001!GE*1*1!IEA*1*000000001!

ISA*00*0000000000*00*0000000000*ZZ*AGA000000000000*ZZ*DMDCDEERS1600NB*020906*1230*U*00
401*000000001*0*T*!
GS*HS*AGA000000000000*DMDCDEERS1600NB*20011014*184800*1*X*004010X092!
ST*270*0001!
BHT*0022*13*GaryMTFInqSSNNameDoB*20011014*184800!
HL*120*1!**
NM1*P5*2*DEERS*****46*DMDCDEERS1600NB!
HL*2*1*21*1!
NM1*1P*2*CHCS*****SV*700091!
HL*3*2*22*1!
NM1*IL*1*Perkins*REF*SY*011368715!
HL*4*2*22*0!
NM1*03*1*Perkins!
REF*SY*331568625!
DMG*D8*19961012!
EQ*1**IND*C1!
DTP*307*RD8*20010801-20020517!
SE*16*0001!
GE*1*1!
IEA*1*000000001!

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APPENDIX B

271 DATA MAPPING SAMPLE



Appendix B: 271 Data Mapping Sample

Heading: DEERS Standard 271 MTF Inquiry Response

	Pos.	Seg.		Req.		Loop	Notes and
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	Pos.	Seg.		Req.		Loop	Notes and
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
M			LOOP ID – 2000A			1	
	010	HL	Hierarchical Level (Source)	M	1		
	025	AAA	Request Validation (Optional)	O	1		
			LOOP ID – 2100A			1	
	030	NM1	Individual or Organizational Name	M	1		
	085	AAA	Request Validation	O	1		
M			LOOP ID – 2000B			1	
	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID – 2100B			1	
	030	NM1	Individual or Organizational Name	M	1	1	
	085	AAA	Request Validation (Optional)	O	1		
M			LOOP ID – 2000C			1	
	010	HL	Hierarchical Level (Subscriber)	M	1		
	020	TRN	Trace (Optional)	O	1		n1
			LOOP ID – 2100C			1	
	030	NM1	Individual or Organizational Name (Subscriber)	M	1		
	040	REF	Reference Identification	O	1		
	040	REF	Reference Identification	O	1		
	060	N3	Address Information	O	1		
	070	N4	Geographic Location	O	1		
	080	PER	Administrative Communications Contact	O	1		
	085	AAA	Request Validation (Optional)	O	1		
	100	DMG	Demographic Information	O	1		
	110	INS	Insured Benefit	O	1		
	120	DTP	Date or Time or Period	O	1		
			LOOP ID – 2110C			>1	
	130	EB	Eligibility or Benefit Information (Personnel Data)	O	1		
	330	LS	Loop Header	O	1		
			LOOP ID – 2120C			1	
	340	NM1	Individual or Organizational Name	O	1		
	370	N4	Geographic Location	O	1		

400	LE	Loop Trailer	O	1	
LOOP ID – 2110C					1
130	EB	Eligibility or Benefit Information (Health Care Coverage)	O	1	
150	DTP	Date or Time or Period	O	1	
150	DTP	Date or Time or Period	O	1	
160	AAA	Request Validation (Optional)	O	1	
250	MSG	Message Text	O	1	
LOOP ID – 2110C					>1
130	EB	Eligibility or Benefit Information (Primary Care Manager)	O	1	
150	DTP	Date or Time or Period	O	1	
150	DTP	Date or Time or Period	O	1	
330	LS	Loop Header	O	1	
LOOP ID – 2120C					1
340	NM1	Individual or Organizational Name (Entity-Primary Care Manager)	O	1	
370	N4	Geographic Location	O	1	
380	PER	Administrative Communications Contact	O	1	
400	LE	Loop Trailer	O	1	
LOOP ID – 2110C					>1
130	EB	Eligibility or Benefit Information (Other Government Program)	O	1	
150	DTP	Date or Time or Period	O	1	
150	DTP	Date or Time or Period	O	1	
LOOP ID – 2000D					>1
M	010	HL	Hierarchical Level (Dependent)	M	1
	020	TRN	Trace (Optional)	O	1 n2
LOOP ID – 2100D					1
030	NM1	Individual or Organizational Name (Dependent)	M	1	
040	REF	Reference Identification	O	1	
060	N3	Address Information	O	1	
070	N4	Geographic Location	O	1	
080	PER	Administrative Communications Contact	O	1	
085	AAA	Request Validation (Optional)	O	1	
100	DMG	Demographic Information	O	1	
110	INS	Insured Benefit	O	1	
LOOP ID – 2110D					>1
130	EB	Eligibility or Benefit Information (Health Care Coverage)	O	1	
150	DTP	Date or Time or Period	O	1	
150	DTP	Date or Time or Period	O	1	
160	AAA	Request Validation	O	1	
250	MSG	Message Text	O	1	
LOOP ID – 2110D					>1
130	EB	Eligibility or Benefit Information (Primary Care Manager)	O	1	

	150	DTP	Date or Time or Period	O	1	
	150	DTP	Date or Time or Period	O	1	
	330	LS	Loop Header	O	1	
	LOOP ID – 2120D					1
	340	NM1	Individual or Organizational Name (Entity- Primary Care Manager)	O	1	
	370	N4	Geographic Location	O	1	
	380	PER	Administrative Communications Contact	O	1	
	400	LE	Loop Trailer	O	1	
	LOOP ID – 2110D					>1
	130	EB	Eligibility or Benefit Information (Other Government Program)	O	1	
	150	DTP	Date or Time or Period	O	1	
	150	DTP	Date or Time or Period	O	1	
M	410	SE	Transaction Set Trailer	M	1	

Heading: 271 MTF Dependent Inquiry Response

	<u>Pos.</u>	<u>Seg.</u>	<u>Name</u>	<u>Req.</u>	<u>Max.Use</u>	<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>		<u>Des.</u>		<u>Repeat</u>	<u>Comments</u>
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	<u>Pos.</u>	<u>Seg.</u>	<u>Name</u>	<u>Req.</u>	<u>Max.Use</u>	<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>		<u>Des.</u>		<u>Repeat</u>	<u>Comments</u>
M			LOOP ID – 2000A			1	
	010	HL	Hierarchical Level (Source)	M	1		
	025	AAA	Request Validation (Optional)	O	9		
			LOOP ID – 2100A			1	
	030	NM1	Individual or Organizational Name	M	1		
	085	AAA	Request Validation	O	9		
M			LOOP ID – 2000B			1	
	010	HL	Hierarchical Level (Receiver)	M	1		
	025	AAA	Request Validation (Optional)	O	9		
			LOOP ID – 2100B			1	
	030	NM1	Individual or Organizational Name	M	1		
M			LOOP ID – 2000C			1	
	010	HL	Hierarchical Level(Subscriber)	M	1		
	020	TRN	Trace (Optional)		3		
			LOOP ID – 2100C			1	
	030	NM1	Individual or Organizational Name (Subscriber)	M	1		
	040	REF	Reference Identification	O	9		
	040	REF	Reference Identification	O	9		
	085	AAA	Request Validation (Optional)	O	9		
	100	DMG	Demographic Information	O	1		
	110	INS	Insured Benefit	O	1		
	120	DTP	Date or Time or Period	O	9		
			LOOP ID – 2110C			>1	
	130	EB	Eligibility or Benefit Information (Personnel Data)	O	1		
	330	LS	Loop Header	O	1		
			LOOP ID – 2120C			1	
	340	NM1	Individual or Organizational Name	O	1		
	370	N4	Geographic Location	O	1		
	400	LE	Loop Trailer	O	1		
M			LOOP ID – 2000D			>1	
	010	HL	Hierarchical Level (Dependent)	M	1		
	020	TRN	Trace (Optional)	O	3		n2
			LOOP ID – 2100D			1	

030	NM1	Individual or Organizational Name (Dependent)	M	1	
040	REF	Reference Identification	O	9	
060	N3	Address Information	O	1	
070	N4	Geographic Location	O	1	
080	PER	Administrative Communications Contact	O	3	
085	AAA	Request Validation (Optional)	O	9	
100	DMG	Demographic Information	O	1	
110	INS	Insured Benefit	O	1	
LOOP ID – 2110D				>1	
130	EB	Eligibility or Benefit Information (Health Care Coverage)	O	1	
150	DTP	Date or Time or Period	O	20	
150	DTP	Date or Time or Period	O	20	
160	AAA	Request Validation	O	9	
250	MSG	Message Text	O	10	
LOOP ID – 2110D				>1	
130	EB	Eligibility or Benefit Information (Primary Care Manager)	O	1	
150	DTP	Date or Time or Period	O	20	
150	DTP	Date or Time or Period	O	20	
330	LS	Loop Header	O	1	
LOOP ID – 2120D				1	
340	NM1	Individual or Organizational Name (Entity-Primary Care Manager)	O	1	
370	N4	Geographic Location	O	1	
380	PER	Administrative Communications Contact	O	3	
400	LE	Loop Trailer	O	1	
LOOP ID – 2110D				>1	
130	EB	Eligibility or Benefit Information (Other Government Program)	O	1	
150	DTP	Date or Time or Period	O	20	
150	DTP	Date or Time or Period	O	20	
M	410	SE	Transaction Set Trailer	M	1

270/271 Eligibility Inquiry and Response Sample Data

ISA*00*0000000000*00*0000000000*ZZ*BAH000000000000*ZZ*DMDCDEERS1600NB*021009*1215*U*00
401*000000038*0*T*!GS*HS*BAH000000000000*DMDCDEERS1600NB*20021009*121500*1*X*004010X0
92!ST*270*0038!BHT*0022*13*PennyNTP02FamAllP51a*20021030*121500!HL*1**20*1!NM1*P5*2*DEERS
*****46*DMDCDEERS1600NB!HL*2*1*21*1!NM1*1P*2*CHCS*****SV*700540!HL*3*2*22*0!NM1*IL*1*
Perkins!REF*SY*011368625!DMG*D8*19561012!EQ*30**FAM*C1!DTP*307*RD8*20010801-
20020517!SE*13*0038!GE*1*1!IEA*1*000000038!

ISA*00*aaaaa*00*aaaaa*00*ZZ*DMDCDEERS1600NB*ZZ*BAH000000000000*021030*0639*U*00401*000
000011*0*T*!

GS*HB*DMDCDEERS1600NB*BAH000000000000*20021030*0639*4*X*004010X092!

ST*271*0004!

BHT*0022*11*PennyNTP02FamAllP51a*20021030*063857!

HL*120*1!**

NM1*P5*2*DMDCDEERS*****46*DMDCDEERS1600NB!

HL*2*1*21*1!

NM1*1P*2*BAH000000000000*****SV*700540!

HL*3*2*22*1!

NM1*IL*1*PERKINS*DAVID*GERARD*COL**MI*1025126882!

REF*SY*011368625!

REF*ML*06!

N3*4 WYNN PL!

N4*FORT STEVEN*GA*313151840*US!

PER*IC**HP*8128792581!

DMG*D8*19561012*M!

INS*Y*18!

EB*W!

LS*2120C!

NM1*36*2*****FA*AAWAQPA AFC!

LE*2120C!

EB*1**88**601!

DTP*356*D8*20010801!

DTP*357*D8*20020517!

EB*1**1**001!

DTP*356*D8*20010801!

DTP*357*D8*20020517!

EB*6**35**000!

DTP*356*D8*20010801!

DTP*357*D8*20020517!

HL*4*3*23*0!

NM1*03*1*Perkins*Cassandra*J***MI*0125126890!

REF*SY*215762469!

N3*4 WYNN PL!

N4*FORT STEVEN*GA*313151840*US!PER*IC**HP*9128772588!

DMG*D8*19860309*F!
INS*N*19!
EB*1**88**603!
DTP*356*D8*20010801!
DTP*357*D8*20020517!
EB*1**1**003!
DTP*356*D8*20010801!
DTP*357*D8*20020517!
EB*1**35**202!
DTP*356*D8*20010801!
DTP*357*D8*20020517!
HL*5*3*23*0!
NM1*03*1*Perkins*Chad*M***MI*1055126704!
REF*HJ*D802001374!
N3*4 WYNN PL!
N4*FORT STEVEN*GA*313151840*US!
PER*IC**HP*8128762588!
DMG*D8*19890418*M!
INS*N*19!EB*1**88**603!
DTP*356*D8*20020430!
DTP*357*D8*20020517!
EB*1**88**603!
DTP*356*D8*20010801!
DTP*357*D8*20020429!
EB*1**1**108!
DTP*356*D8*20020430!
DTP*357*D8*20020517!
EB*1**1**003!
DTP*356*D8*20010801!
DTP*357*D8*20020429!
EB*1**35**202!
DTP*356*D8*20010801!
DTP*357*D8*20020517!
HL*6*3*23*0!
NM1*03*1*PERKINS*JENNIFER*D***MI*1005126912!
REF*SY*104603792!
N3*4 WYNN PL!
N4*FORT STEVEN*GA*313151840*US!
PER*IC**HP*8128752589!
DMG*D8*19600513*F!
INS*N*01!EB*1**88**603!
DTP*356*D8*20010801!
DTP*357*D8*20020517!
EB*1**1**003!
DTP*356*D8*20010801!
DTP*357*D8*20020517!

EB*1**35**202!

DTP*356*D8*20010801!

DTP*357*D8*20020517!

SE*86*0004!

GE*1*4!

IEA*1*000000011!

Heading: Partial Match

	<u>Pos.</u>	<u>Seg.</u>		<u>Req.</u>		<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	<u>Pos.</u>	<u>Seg.</u>		<u>Req.</u>		<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
			LOOP ID - 2000A			1	
M	010	HL	Hierarchical Level (Source)	M	1		
			LOOP ID - 2100A			1	
M	030	NM1	Individual or Organizational Name (Source)	M	1		
			LOOP ID - 2000B			1	
M	010	HL	Hierarchical Level (Receiver)	M	1		
			LOOP ID - 2100B			1	
M	030	NM1	Individual or Organizational Name (Receiver)	M	1		
			LOOP ID - 2000C			>1	
M	010	HL	Hierarchical Level (Subscriber)	M	1		
	020	TRN	Trace	O	1		n1
			LOOP ID - 2100C			1	
M	030	NM1	Individual or Organizational Name (Subscriber)	M	1		
	040	REF	Reference Identification	O	1		
	040	REF	Reference Identification	O	1		
	060	N3	Address Information	O	1		
	070	N4	Geographic Location	O	1		
	080	PER	Administrative Communications Contact	O	1		
	100	DMG	Demographic Information	O	1		
	110	INS	Insured Benefit	O	1		
	120	DTP	Date or Time or Period	O	1		
			LOOP ID - 2110C			>1	
	130	EB	Eligibility or Benefit Information (Personnel)	O	1		
	330	LS	Loop Header	O	1		
			LOOP ID - 2120C			1	
	340	NM1	Individual or Organizational Name (Unit)	O	1		
	370	N4	Geographic Location	O	1		
	400	LE	Loop Trailer	O	1		
			LOOP ID - 2000D			>1	

	010	HL	Hierarchical Level (Dependent)	O	1	
	020	TRN	Trace (Optional)	O	1	n2
			LOOP ID - 2100D		11	
M	030	NM1	Individual or Organizational Name (Dependent)	M	1	
	040	REF	Reference Identification	O	1	
	060	N3	Address Information	O	1	
	070	N4	Geographic Location	O	1	
	080	PER	Administrative Communications Contact	O	1	
	100	DMG	Demographic Information	O	1	
	110	INS	Insured Benefit	O	1	
	120	DTP	Date or Time or Period	O	1	
M	410	SE	Transaction Set Trailer	M	1	

271 Partial Match Sample Data

ISA*00*000000000*00*000000000*ZZ*AGA000000000000*ZZ*DMDCDEERS1600NB*010820*1230*U*00401*000000001*0*T*!GS*HS*AGA000000000000*DMDCDEERS1600NB*20011014*184800*1*X*004010X092!ST*270*0001!BHT*0022*13*PartialMnTP4DVUP051b*20011014*184800!HL*1**20*1!NM1*P5*2*DEERS*****46*DMDCDEERS1600NB!HL*2*1*21*1!NM1*1P*2*CHCS*****SV*700091!HL*3*2*22*0!NM1*IL*1!REF*SY*055345257!EQ*1**FAM*C1!DTP*307*RD8*2001082720011003!SE*12*0001!GE*1*1!IEA*1*00000001!

ISA*00*aaaaaa*00*aaaaaa*ZZ*DMDCDEERS1600NB*ZZ*AGA000000000000*021101*1257*U*00401*000000509*0*T*!

GS*HB*DMDCDEERS1600NB*AGA000000000000*20021101*1257*415*X*004010X092!

ST*271*0259!

BHT*0022*11*PartialMnTP4DVUP051b*20021101*125654!

HL*1**20*1!

NM1*P5*2*DMDCDEERS*****46*DMDCDEERS1600NB!

HL*2*1*21*1!

NM1*1P*2*AGA000000000000*****SV*700091!

HL*3*2*22*0!

NM1*IL*1*RIVERA MERCADO*AUDELIZ!

REF*HJ*B00042685900!

REF*SY*055345257!

N3*419 W 17TH ST APT 19J!

N4*NEW YORK*NY*100114828*US!

PER*IC**HP*2127271885!

DMG*D8*19460509*M!

INS*Y*18!

DTP*442*D8*00000000!

HL*4*2*22*0!

NM1*IL*1*RIVERA MERCADO*AUDELIZ!

REF*HJ*B00042686000!

REF*SY*053345256!

DMG*D8*19440209*U!

INS*Y*18!

DTP*442*D8*00000000!

SE*24*0259!

GE*1*415!

IEA*1*000000509!

Heading: 271 Error Response

	<u>Pos.</u>	<u>Seg.</u>		<u>Req.</u>		<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
M	010	ST	Transaction Set Header	M	1		
M	020	BHT	Beginning of Hierarchical Transaction	M	1		

Detail:

	<u>Pos.</u>	<u>Seg.</u>		<u>Req.</u>		<u>Loop</u>	<u>Notes and</u>
	<u>No.</u>	<u>ID</u>	<u>Name</u>	<u>Des.</u>	<u>Max.Use</u>	<u>Repeat</u>	<u>Comments</u>
M	010	HL	LOOP ID - 2000A			1	
			Hierarchical Level (Source)	M	1		
			Request Validation	O	1		
			LOOP ID - 2100A			1	
			Individual or Organizational Name	O	1		
			Request Validation	O	1		
M	010	HL	LOOP ID - 2000B			1	
			Hierarchical Level (Receiver)	M	1		
			Request Validation	O	1		
			LOOP ID - 2100B			1	
			Individual or Organizational Name	O	1		
			Request Validation	O	1		
M	010	HL	LOOP ID - 2000C			1	
			Hierarchical Level (Subscriber)	M	1		
			Request Validation	O	1		
			LOOP ID - 2100C			1	
			Individual or Organizational Name	O	1		
			Reference Identification	O	1		
			LOOP ID - 2110C			1	
			Eligibility or Benefit Information	O	1		
			Request Validation	O	1		
M	010	HL	LOOP ID - 2000D			1	
			Hierarchical Level (Dependent)	M	1		
			Request Validation	O	1		
			LOOP ID - 2100D			1	
			Individual or Organizational Name	O	1		
			Reference Identification	O	1		
			LOOP ID - 2110D			1	
			Eligibility or Benefit Information	O	1		
			Request Validation	O	1		

	130	EB	Eligibility or Benefit Information	O	1		
	160	AAA	Request Validation	O	1		
	250	MSG	Message Text	O	1		
M	410	SE	Transaction Set Trailer	M	1		

271 Error Response: Person Not Found

ISA*00*0000000000*00*0000000000*ZZ*AGA000000000000*ZZ*DMDCDEERS1600NB*020916*1648*U*00
401*000000012*0*T*!GS*HS*AGA000000000000*DMDCDEERS1600NB*20020916*1648*12*X*004010X09
2!ST*270*0012!BHT*0022*13*NHBunkSponsInqPersId*20020916*1648!HL*1**20*1!NM1*P5*2*DMDCDEE
RS*****46*DMDCDEERS1600NB!HL*2*1*21*1!NM1*1P*2*CHCS*****SV*700091!HL*3*2*22*0!NM1*IL
*1*Fryar*****MI*1112748945!DMG*D8*19770524!EQ*1**FAM*C1!DTP*307*RD8*20010827-
20011003!SE*12*0012!GE*1*12!IEA*1*000000012!

ISA*00*0000000000*00*0000000000*ZZ*AGA000000000000*ZZ*DMDCDEERS1600NB*020916*1648*U*00
401*000000233*0*T*!
GS*HB*DMDCDEERS1600NB*AGA000000000000*20021009*0938*176*X*004010X092!
ST*271*0131!
BHT*0022*11*NHBunkSponsInqPersId*20021009*093844!
HL*1**20*1!
NM1*P5*2*DMDCDEERS*****46*DMDCDEERS1600NB!
HL*2*1*21*1!
NM1*1P*2*AGA000000000000*****SV*700091!
HL*3*2*22*0!
NM1*IL*1*Fryar!REF*HJ*1112748945!
AAA*Y**75*C!
SE*11*0131!
GE*1*176!
IEA*1*000000233!

271 Error Response: DEERS System Error

ISA*00*0000000000*00*0000000000*ZZ*AGA000000000000*ZZ*DMDCDEERS1600NB*020916*1648*U*00
401*000000012*0*T*!
GS*HB*DMDCDEERS1600NB*AGA000000000000*20021022*0706*351*X*004010X092!
ST*271*0226!
BHT*0022*11*TestSystemUPOCT08A 22070552*20021022*070618!
HL*1**20*1!
AAA*Y**42*R!
NM1*P5*2*DMDCDEERS*****46*DMDCDEERS1600NB!
HL*2*1*21*1!
NM1*1P*2*AGA000000000000*****SV*700091!
HL*3*2*22*0!
NM1*IL*1*Fryar!
REF*SY*138424598!
SE*11*0226!
GE*1*351!
IEA*1*000000012!

APPENDIX C

BUSINESS DATA PROCESSING AGREEMENTS

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Appendix C: Business Data Processing Agreements

We have agreed and established that there are 2 types of possible inquiry/update to the DEERS X12 interface:

1. 270 Healthcare Coverage Eligibility Inquiry
2. 275 Patient Update

We have agreed and established that there are 10 types of possible responses from the DEERS X12 Interface:

1. 271 Full Response - Eligibility data for an individual and/or family.
2. 271 Partial Match Response – Sponsor or person data returned when multiple individuals are found. Used to assist in re-inquiry unique identifier (patient identifier) is recommended.
3. 271 Error Response - Person not found, utilizing the Triple A segment.
4. 271 Error Response - DEERS unable to respond utilizing the Triple A segment.
5. 997 Functional Acknowledgment - Message structure in error.
6. TA1 Response - Invalid or Unauthorized Trading Partner relationship.
7. HTTP communication NAK – URL or Servlet failure.
8. 275 Patient Update – Notification of patient/person update.
9. 824 Application Acknowledgment – Signifying a successful or failed patient update.
10. 824 Application Acknowledgment – DEERS unable to respond.

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